Parent Waiver and Consent Form
Eclipse Ultimate Frisbee 2026/2027

As the parent or legal guardian of the child named below, I hereby give my full consent and approval for my child to participate as a team member in Eclipse Ultimate Frisbee program.

By signing this waiver, I agree that the Eclipse Ultimate Frisbee team is not responsible for any injuries that its athletes may sustain whether at practice or games, as well as in traveling and other related activities incidental to my child's participation, and I am willing to assume these risks on behalf of my child.

I acknowledge that as a member of Eclipse Ultimate Frisbee, the participant is expected to attend all practices, games, and events. If scheduling conflicts occur, the participant is expected to communicate with a coach or captain to resolve scheduling conflicts.

Furthermore, each student and/or their parents is/are expected to uphold the academic standards required for participation in Eclipse Ultimate Frisbee program. Eclipse Ultimate Frisbee requires that participants cannot be failing more than one class at their high school. Eclipse Ultimate Frisbee participants are expected to uphold personal integrity both on and off the field. Each party is solely responsible for any deficiency in these areas.

In addition to giving my full consent for my child's participation, I do hereby waive, release, and hold harmless Eclipse Ultimate Frisbee, its officers, coaches, sponsors, supervisors, and representatives for any injury that may be suffered by my child in the normal course of participation and the activities incidental thereto, whether the result of negligence or any other cause.

Name of Child:_____DOB: _____

Address/City/State: _____

Parent/Guardian Signature:_____

Date: _____