

PARENT/GUARDIAN CONSENT FORM

Gender ☐ Boy ☐ Girl

School Name: _____

School Authority /
Sports Co-ordinator /
Coach: _____

Name _____

Phone No. _____

Name of the Participant: _____

Last Name _____

First Name _____

Middle Name _____

SFA ID*: _____

Participant's
Residential Address: _____

Date of Birth: _____

Day

Month

Year

Age: _____

Participant's Contact Information:

Mob: _____

Res: _____

E-mail: _____

Emergency Contact (Parent / Guardian):

Name: _____

E-mail: _____

Mob: _____

Res: _____

For Official Use Only

Form No.: _____

Date: _____

Inwards No.: _____

SFA Rec Stamp

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Select the Sports you wish to participate in:

Team Sports:

- ☐ Basketball ☐ Handball ☐ Volleyball ☐ Football ☐ Throwball
- ☐ Hockey ☐ Kho Kho ☐ Kabaddi

Racquet Sports:

- ☐ Tennis (Singles & Doubles) ☐ Table Tennis (Singles & Doubles)
- ☐ Badminton (Singles & Doubles) ☐ Squash

Combat Sports:

- ☐ Karate ☐ Judo ☐ Taekwondo
- ☐ Boxing ☐ Sport Mix Martial Arts ☐ Fencing

Target Sports:

- ☐ Shooting ☐ Archery

Aquatics:

- ☐ Swimming ☐ Water Polo

Individual Sports:

- ☐ Carrom ☐ Chess
- ☐ Athletics

In the event that a school does not register students will still be allowed to participate by paying:

- 1) Rs. 300 +all applicable taxes/ student (Individual Sports, Target Sports, Racquet Sports, Combat Sports and Aquatics)
- 2) Rs. 200+ all applicable taxes/ student (Team Sports)
- 3) In case a Student is participating in both team and individual sports (For example : he / she is participating in Tennis and Handball) then he / she will have to pay Rs. 500 +all applicable taxes.

Kindly Note: Payment of the above mentioned fees allows a student to participate in all the sports mentioned in their respective Sports Category.

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RELEASE/ WAIVER FORM

In consideration of the acceptance of this application as a participant in the Event, I/we, Mr.----- and Mrs.----- the minor's parent and/or legal guardian hereby agree to assume all risks attendant upon the child while participating in this Event. I/We understand the nature of the activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such event. I/We understand that the (a) the activities involve risks and dangers of serious injury, including permanent disability, paralysis, and death ("risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Event; (c) there may be other risks and social and economic losses either not known to us or not readily foreseeable at this time, and I/we fully accept and assume all such risks and all responsibility for losses, costs, and damages the child/participant incur as a result of participation or that of the minor in the Event

I/We hereby waive, release and discharge any and all claims for death, personal injury, or property damage which the child/participant may have, or which may hereafter accrue to child/participant, as a result of child/participant participation in this Event. I/We agree to indemnify and hold harmless from liability SFA Events Pvt. Ltd. and its members, chapters and/or any of their agents, servants, volunteers, or employees by reason of any accident, death, injury, or damages, to persons or property which the child/participant may suffer, while participating in this Event. It is further understood and agreed that this waiver, release and assumption of risks to be binding on our heirs and assigns of the child/participant. I/We agree to assume all responsibilities for any property damage or injury to any person caused by child/participant while participating in this Event. I/We have read and understood the contents of this form.

Parent/Guardian's Name:

Date: _____

Parent/Guardian's Signature: