

Bahamas Football Association

REGISTRATION FOR STAGE 1: SMALL GROUP FOOTBALL TRAINING, *scheduled from Jul. 6 to Aug. 8*

Club:	
Player Name:	
BFA Age Division:	
Parent/Guardian Name:	
Parent/Guardian Telephone:	
Home Address:	
Emergency Name:	
Emergency Telephone:	
<p>FOR PARENTS/GUARDIANS: I have carefully read this document in full, discussed it with the youth football player/s in our home, and now agree as follows:</p>	
<p>A. Participation Considerations: I have carefully considered the health and safety risks of returning to training, and have decided that I agree for my child to participate in Stage I football training:</p>	Parent Signature:
<p>B. General Health Requirements: I understand all the health requirements for participating in training, and will notify the Club immediately if there is any chance that my child has been exposed to Covid-19.</p>	Parent Signature:
<p>C. Scope of Training: I understand the limited scope of training during Stage 1, I have discussed the changes from traditional training with my child, and we all support the social distancing and hygiene protocols required.</p>	Parent Signature:
<p>D. Physical Interaction Limitations: I understand the physical interaction limitations required during Stage 1, and have discussed acceptable levels of interaction with others, with my child.</p>	Parent Signature:
<p>E. General Hygiene Requirements for Players: I understand all hygiene requirement for training, and will ensure that my child complies with these health and safety protocols before, during and after training.</p>	Parent Signature:
<p>F. Equipment, Training Gear, and Facilities Hygiene: I agree that my child will come to training in clean clothes, bring his/her personal water bottle, use only his/her own ball, and abide by requirements imposed by coaches and administrators.</p>	Parent Signature:
<p>G. Daily Health Checks for Players.: I will monitor my child so that he/she does NOT come to training if he/she or anyone in our household has:</p> <ul style="list-style-type: none"> • Fever at or above 100 F (check temperature before leaving home); • Sore throat; • Chills; • Headaches; • Sinus congestion and/or coughs; • Vomiting and/or diarrhea; • Exposure to COVID in the past 14 days; and • If my child presents with any health issues during training, I will pick up my child from training immediately. 	Parent Signature:
<p>H. Player Registration for Contact Tracing Purposes: I agree to the use of the data included in this form for COVID-19 tracing purposes by the BFA and health professionals, should this become necessary.</p>	Parent Signature:
<p>Notwithstanding the precautions taken, there exists an inherent risk of exposure to Covid-19. I hereby agree that I fully indemnify: (1) the BFA, its directors and officers; (2) the Club and its directors, officers, coaches, volunteers and administrators; (3) other parents and volunteers involved in transporting my child; from any and all liability should my child or anyone in my household become ill for any period of time, directly or indirectly related to Stage 1 football training.</p>	Parent Signature: