

SAN MARCOS POP WARNER FOOTBALL & CHEER CONTRACT

As the Parent or legal guardian of the child named below, I hereby consent to abide, and also ensure that my child will abide by all of the rules, guidelines, policies and directives established by the team, Association (San Marcos Pop Warner) and Conference (West Coast Conference) of which my child will or intends to be a participant. Additionally, I will do my best to ensure that members of my family, my friends, and relatives who may be directly or indirectly participating in team, Association, or Conference activities, will also abide by all of the rules, guidelines, policies and directives established by the team, Association, or Conference of which my child will be a participant. I acknowledge that I have read and understand the requirements for registration, the refund policy as stated on the application form, and the required volunteer time.

I further agree to the following:

1. I will not criticize, belittle, or question the ability or authority of any official, coach, or volunteer of the team, Association, or Conference.
2. I will in no way criticize, demean, belittle, mock, taunt or attempt to communicate with any team, Association, or Conference REFEREE, before, during, or after a game or team, Association, or Conference activity. However, I may offer genuine praise and thanks for a referee's performance as would be expected in and recognized as a demonstration of good sportsmanship.
3. I will control my emotions at games and events. I will not yell at or criticize other players, coaches, parents or officials of the team, Association, or Conference.
4. I will not use foul language.
5. I will not smoke or use tobacco products or partake of or be under the influence of alcoholic beverages while on the premises of a team, Association or Conference activity.
6. Coach/Parent relationship:
 - a. I will not put pressure on a coach to:
 - 1) Play my child at a certain position.
 - 2) Play my child more than is required by the Minimum Play Rule.
 - 3) Alter his/her coaching style, technique, or philosophy.
 - 4) Question a referee's judgment or overall officiating ability.
 - b. I will:
 - 1) Support the decision of my child's coach to play my child at any position the coach sees fit.
 - 2) Ensure that my child is on time for all games, practices, and team, Association, and Conference activities.
 - 3) Do my best to control any negative behavior of my child as pointed out by his/her coach or team, Association or Conference official.
 - 4) Encourage my child to play any position his/her coach recommends.
7. All grievances, problems, questions, etc., will be discussed with a team, Association, or Conference official outside of the presence of children or preferably accomplished off the premises in a personal meeting, telephone conversation, or by email.
8. I will respect a team, Association, or Conference official's right NOT to communicate with me on the "spur of the moment" about issues that may be potentially controversial, or, under the circumstance, not in the immediate best interests of the child participants.
9. Whenever possible, I will volunteer my time and talents to support my child's participation in team, Association, or Conference activities.
10. I understand that all team, Association, or Conference games and practices are competitive activities however, they will endeavor to function under a recreational philosophy, stressing sports as a fun, healthy activity to participate in for enjoyment and not solely for competitive advantage or personal achievement.
11. I will support the method and result of team formation within the Association or Conference and understand that the decision of my child's placement on a team by the Association or Conference is final.
12. I understand that a child is not guaranteed a coach, team, or division. This will be decided by the Head Coach, Player Agent, and Executive Board Members, and children will be placed according to what is in the best interest and safest for the child, team, and Association.

PLAYER'S NAME _____ DIVISION _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

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TEAM FORMATION

I understand that a child is not guaranteed a team, coach, or division. This will be decided by the San Marcos Pop Warner Player Agent and/or the Team Formation committee. My child will be placed according to what is *in the best interest and safest for the child and Association*. In addition, participants are not guaranteed they will "track" with their previous team or coach.

I will support the method and result of the team formation within the Association or Conference and understand that the decision of my child's placement on a team by the Association or Conference is final.

I understand that San Marcos Pop Warner will *attempt* to place participants in the requested and/or lowest possible division.

Participant Name: _____

Parent/Guardian Signature: _____ Date _____

FUNDRAISING

I understand that San Marcos Pop Warner requires participation in a Association fundraiser, to be determined at a later date. Each participant is expected to raise at least \$50.00. Failure to participate or submit your funds (of at least \$50.00) will result in a debt with SAN MARCOS POP WARNER. These funds will be billed for this debt and failure to pay this \$50.00 debt may result in further collection fees and denial of further participation with SAN MARCOS POP WARNER.

Participant Name: _____

Parent/Guardian Signature: _____ Date _____

TEAM SPONSORSHIP

All Teams are required to have a Team Sponsor (\$500/team). If a community sponsor cannot be found, the \$500 will be divided up between the players on the team.

Participant Name: _____

Parent/Guardian Signature: _____ Date _____

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FEES and REFUNDS

Fees: I understand that all fees are due by 31st of May unless specified in a payment plan agreement (online registrants only). There will be a \$25.00 fee for any returned checks.

All registration documents must be submitted to San Marcos Pop Warner no later than 30th of June.

I understand that my child will not receive any equipment or uniforms until all documents are received and verified. I understand that failure to submit all documents and fees will prevent my child from participation in the Fall / active / current season.

The SAN MARCOS POP WARNER Refund Policy will apply if your child is not permitted to participate due to lack of documents or nonpayment of fees.

Refund Policy: All refund requests must be received in writing. \$75.00 of the registration fee is nonrefundable under any circumstances. Resignations received prior to June 1st will receive a refund minus the \$75.00 non-refundable fee and the cost of any personalized equipment already purchased.

There will be no refunds after 31st of May. NO EXCEPTIONS.

Special circumstances and participants accepted with known weight issues will be evaluated on a case-by-case basis. All refunds will be addressed by the Executive Board at the next scheduled meeting.

Participant Name: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

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MEDIA RELEASE FORM

I authorize San Marcos Pop Warner and its volunteers to create photographs, video and audio recordings of my child during San Marcos Pop Warner, West Coast Conference, and Pop Warner Little Scholars events.

I understand that San Marcos Pop Warner may revise, annotate, edit and otherwise alter the recorded material of my child.

I understand that San Marcos Pop Warner owns all copyright to these materials. I hereby release San Marcos Pop Warner and its volunteers from any and all claims of any nature whatsoever which now or may hereafter having connection with these recorded materials, including but not limited to claims based on defamation, copyright infringement, trademark infringement, or infringement of my child's right of privacy or of my child's right to publicity.

Internet Special Release Information

I authorize San Marcos Pop Warner to publish photographs, video, or audio of my child, as well as written or recorded oral descriptions on the World Wide Web. These materials will be used for Pop Warner purposes only and only as part of San Marcos Pop Warner, West Coast Conference, and/or Pop Warner Little Scholars.

PARTICIPANT NAME _____

PARENT/GUARDIAN NAME _____

PARENT/GUARDIAN SIGNATURE _____ DATE: _____

I **DO NOT** authorize San Marcos Pop Warner to create photographs, video and audio recordings of my child as well as written or recorded oral descriptions.

PARTICIPANT NAME: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN SIGNATURE _____ DATE: _____