

CERTIFICATION, ELIGIBILITY AND RELEASE DECLARATION

(This form is to be signed by the appropriate people)

YMCA Association #: _____ YMCA_NAME: _____

We the undersigned certify that each participant representing _____ entered into **2019 YMCA National Diving Championship**:

1. is eligible to represent the YMCA Association named above and meets the requirements stated in the Rules that Govern YMCA Competitive Sports;
2. is an amateur and has been a current full privilege annual YMCA member for the last 90 days and will be at the time of the National Meet;
3. has been active in the program of this Association during the current season;
4. has not represented another YMCA or other swimming/diving organization with the exception of their high school;
5. is not in violation of any of the provisions as described in Rules That Govern YMCA Competitive Sports;
6. complies with Eligibility Rules for the **2019 YMCA National Diving Championship**;
7. have been examined by their family doctor or by another qualified medical examiner, and we have on file evidence (a form, card or letter) certifying that they are medically qualified to engage in swimming & diving competition.

COACHES: We attest that all coaches representing this YMCA at the YMCA National Championship Meet have cleared a background screening within the past 2 years. This background screening meets the standards set forth by USA Swimming.

AGREEMENT - Each team and each team member in applying for and entering this National YMCA sports competition does thereby agree to abide by and also support the standard that any person irrespective of race, color or creed shall be permitted to participate in this Championship providing each team member meets all conditions of eligibility and is properly qualified.

INSURANCE - Our Association now has insurance coverage for representative(s) including leadership and participants who will be in attendance at the **2019 YMCA National Diving Championship** for the period of meet. I hereby certify that YMCA has a minimum of \$1,000,000/\$2,000,000 in liability insurance that covers our coaches and swimmers during their participation in the **2019 YMCA National Diving Championship**. The YMCA of the USA must be named the Certificate Holder and also names the YMCA of the USA as an additional insured as it relates to this meet.

RELEASE - In consideration of your accepting this entry, I hereby, for myself, heirs, executor and administrators, waive and release any and all right and claim for damages I may have against the YMCA of the USA, and **Coral Springs Aquatic Complex**, their agents, representatives or assigns for any and all injuries which may be suffered by participants at the **2019 YMCA National Diving Championship**. Furthermore, we understand that the YMCA of the USA and **Ft Lauderdale ISHOF Aquatic Complex** are not responsible for any intended or unintended consequences related to removing an athlete from competition for a head injury. This includes, but is not limited to, any financial reimbursement associated with such removal.

*(signature, **Executive Director**)*

date

*(signature, **Membership Director**)*

date

*(signature, **Head Coach**)*

date