

CERTIFICATION, ELIGIBILITY & RELEASE DECLARATION

This form is to be signed by the appropriate people

YMCA Association #: _____

YMCA_NAME: _____

YMCA_ADDRESS: _____

The persons, whose names appear on the INDIVIDUAL ENTRY CERTIFICATION form, have read the information. By doing so they therefore declare they are eligible to represent the **YMCA_NAME:** _____ Association and meet the requirements stated in the Rules that Govern YMCA Competitive Sports (9/12).

They further declare that: each participant is an amateur; has been a current full privilege annual YMCA member for the last 90 days (perpetual or bank draft members are included) and will be at the time of the National Meet; has been active in the program of this Association during the current season ; has not represented another YMCA or other swimming/diving organization with the exception of their high school; has represented this Association in formal competition during the current season in swimming and/or diving events; is not in violation of any of the provisions of Rule V as described in Rules That Govern YMCA Competitive Sports (11/96); complies with Rules for the **2017 YMCA DIVING CHAMPIONSHIP**.

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.

MEDICAL EXAMINATION - These representative participants entered in the **2017 YMCA DIVING CHAMPIONSHIP**, 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.

INSURANCE - Our Association now has insurance coverage for representative(s) including leadership and participants who will be in attendance at the **2017 YMCA DIVING CHAMPIONSHIP** for the period of travel from our Association to the meet, during the entire period of the meet and return to our Association. (We suggest you investigate trip insurance). 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 travel to and from and during their participation in the **2016 YMCA 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, **FT LAUDERDALE AQUATIC COMPLEX, FT LAUDERDALE, FL**, their agents, representatives or assigns for any and all injuries which may be suffered by me at the **2017 YMCA DIVING CHAMPIONSHIP**.

We the undersigned have read the above statement of the conditions of competition and hereby certify that the persons whose names appear on the entry blank have read these statements, and agree to be bound by these conditions. We also certify that the names appearing on this entry blank are eligible to compete and represent this Association in the **2017 YMCA DIVING CHAMPIONSHIP** according to the Rules That Govern YMCA Competitive Sports (9/12) and the Rules for the **2017 YMCA DIVING CHAMPIONSHIP**.

(signature, executive director) (please print legibly or type name here) date

(signature, membership director) (please print legibly or type name here) date

(signature, head coach) (please print legibly or type name here) date