

THIS FORM AND ONLY THIS FORM IS TO BE USED
COMMENCING SEPT. 2019

**RHODE ISLAND INTERSCHOLASTIC LEAGUE WARNING
ACKNOWLEDGMENT, AUTHORIZATION, CONSENT AND
ASSUMPTION OF RISK FORM**

The undersigned, being an adult prospective student-athlete or parent/legal guardian of the undersigned minor prospective student-athlete, hereby acknowledge that said student seeks to participate in a student sports program sanctioned by the Rhode Island Interscholastic League ("RIIL"). **The undersigned specifically assert that the student-athlete will comply with the rules and regulations of the RIIL; the undersigned hereby authorize the release of information and reports concerning the academic standing, medical condition, financial aid, attendance, residency, and disciplinary record of the undersigned student to the RIIL for the purpose of enforcing the rules and regulations of the League;** that they are aware that athletic participation requires physical fitness; that the student possesses such fitness; and that some risk of serious injury and even death is involved in sports participation. **For sports involving helmets, we acknowledge the following WARNING: Do not use any helmet to butt, ram or spear an opposing player. This can result in severe head, brain or neck injury, paralysis or death to you and possible injury to your opponent. There is a risk these injuries may also occur as a result of accidental contact without intent to butt, ram or spear. NO HELMET CAN PREVENT ALL SUCH INJURIES.**

Now, therefore, pursuant to the Rhode Island General Laws § 7-6-9 and § 9-1-48, the undersigned, in consideration of participation in a RIIL sanctioned sports program, herein grant to the RIIL, its officers, directors, trustees, volunteers, participants, event sponsors, agents (to include, but not be limited to, the local school committee or its parochial or private equivalent), servants and employees, a waiver of liability as regards practicing for or participating in, in any sports program sanctioned by the RIIL. The undersigned specifically acknowledge that a risk of injury or death exists and assume said risk with respect to practicing for or participating in any contest or exhibition of an athletic or sports matter sanctioned by the RIIL.

In compliance with the Rhode Island General Laws § 9-1-28.1 and all other applicable laws and regulations, the undersigned, in consideration of participation in a RIIL sports program, herein grant to the RIIL, its officers, directors, trustees, volunteers, participants, event sponsors agents (to include, but not be limited to, the local school committee or its parochial or private equivalent), servants and employees, and assigns the absolute right and permission to at any time and by any method record student's name, voice, and likeness and to utilize or assign the use of the student's name, voice, and likeness in any manner of media whatsoever, known or unknown at this time, for purposes of athletic or academic award, publicity, promotion, exhibit, display, trade, announcement, action or advertising, of any kind without restriction.

(This form must be completed by all students, regardless of grade, intending to participate in any Rhode Island Interscholastic League sport after 1 Aug. 2011. All minor students must sign and have a parent or legal guardian also sign. All forms are to be notarized and returned to the League office. Failure of a school to provide a duly executed form will cause the athlete to be declared ineligible.)

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MALE ____ FEMALE ____

YEAR OF GRADUATION _____

School (*print*)

City/town of School (*print*)

FIRST MI LAST
Legal Name of Student (*print*)

Date of Birth of Student

Full address of Mother (*print*)

Name of Person, other than Mother, with whom student is living (*print*)

Full address at which student is living (*print*)

Contact email address

Check here to receive updates and info from the RIIL

Signature of Student

Signature of Parent or Guardian if Student is under age of 18

Date of Signature

Signature of Notary Public Commission Expires (NOTARY SEAL)

State of Rhode Island, County of _____

On this ____ day of 20__, before me, personally appeared _____ and proved through _____

satisfactory evidence of identification to be the person whose name is signed on the attached document in my presence.

Notary Name: _____ ID# _____

Please note: The use of an incorrect address will subject the student-athlete to League penalties, to include one year of ineligibility.