



2020 FALL Sports Bash

Ages: 1st thru 8th Grade

Volleyball - Basketball - Football

Join MEFIYI (Me-For-Incredible-Youth, Inc) for fun and informative Sports Camps with instruction for boys & girls who want to enjoy, learn and improve their skills in Volleyball, Basketball, or Football.

Camps will focus on the fundamentals associated with each sport and will include emphasis on speed and agility.



September 8 - November 14

\$40.00 per week/
per player/per sport

Volleyball

Mondays & Wednesdays

Grades 6th-8th: 3:00pm to 4:30pm

Grades 1st-5th: 5:00pm to 6:30pm

Basketball

Tuesdays & Thursdays

Grades 6th-8th: 3:00pm to 4:30pm

Grades 1st-5th: 5:00pm to 6:30pm

Football

Fridays & Saturdays

Friday: Grades 6th-8th: 3:00pm to 4:30pm

Grades 1st-5th: 5:00pm to 6:30pm

Saturday: Grades 6th-8th: 8:00am to 9:30am

Grades 1st-5th: 10:00am to 11:30am

Instructed by: Jojo & Suzi Townsell

For more information email:

Team@MEFIYI.org Or call: 775-781-5954

This Camp will follow the Covid-19 related guidelines that have been established by the Nevada Health Response (See Attached)

Registration Form

Camper Name: _____

DOB: __/__/__ Grade: _____ Gender: _____

Parent Name: _____

Ph: _____ Alt: _____

Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

What Camp(s) are you registering for?

Please Circle Sport(s) & starting date(s)

**Volleyball (DCCSC) 9/14 9/21 9/28 10/5
10/12 10/19 11/2**

**Basketball (DCCSC) 9/8 9/15 9/22 9/29
10/6 10/13 10/20 11/3 11/10**

**Football (DCCSC) 9/11 9/18 9/25 10/2
10/9 10/16 10/23 11/6 11/13**

***All registration and payments will be processed by Douglas County Parks & Recreation Department.
1329 Waterloo Lane
Gardnerville NV 89410
(775)-782-5500 ext. 1***

Attached Waiver must be signed and returned prior to Camper being admitted to participate.

AGREEMENT, WAIVER & RELEASE

I hereby acknowledge that I am the lawful parent or legal guardian of _____.

My child Does / Does Not have any pre-existing medical conditions that might limit his/her participation.

Explanation: _____

WAIVER & RELEASE

In consideration of my child/ward participating in the 2020 Summer Sports Bash held at Lampe Park and the Douglas County Community Center. I hereby expressly relieve, indemnify, save, and hold harmless MEFIYI and Douglas County, their Boards of Trustees, and all volunteers, agents or employees thereof from and against any and all liability or claims arising from illness, injury or damage suffered or incurred by said child/ward as a result of the acts, omissions, or conduct of any person other than the negligence of MEFIYI or Douglas County while said child/ward is participating in this activity.

I understand that this activity can involve risk of injury including but not limited to neck and spinal injuries, and injury to bones, joints, ligaments, muscles, and tendons. I also certify that my child/ward has no ailment or organic defect that would make participation in this activity dangerous to his/her health.

I further agree to assume the responsibility of seeing that my child/ward cooperates and conforms to the fullest extent with the directions and instructions of the individual(s) supervising my child/ward.

CONSENT TO TREATMENT OF MINOR

I understand it is my responsibility to carry and maintain medical insurance for my child/ward. In the case of an emergency and the parent/guardian cannot be reached, I hereby authorize MEFIYI and/or Douglas County, or any of their employees, agents, representatives, instructors, coaches, or volunteers to emergency treatment as shall be necessary under the circumstances by any physician licensed under the Laws of the State of Nevada.

I further understand and agree that I will be financially responsible for all charges/fees incurred in the rendering of said treatment even if such charges/fees are not covered by medical insurance.

MINOR PHOTO RELEASE

I acknowledge that one of the most effective promotional tools for MEFIYI is the use of photos showing campers in action and that MEFIYI is concerned with the protection of children.

I give permission to MEFIYI to publish or display pictures of my child for use in future MEFIYI publications such as brochures, websites, and multimedia presentations given that in no manner will my child's identity be disclosed by MEFIYI in captions on any photographic reproduction or distribution.

I further agree that if photos are taken of my child, with permission, that I do not expect, nor require, any compensation for the reproduction of such photos now or in the future.

PARENTAL CONSENT

I hereby consent that my son / daughter _____ participate in the 2020 Summer Sports Bash, and I execute the above Agreement, Waiver and Release on his/her behalf. I state that the minor is physically able to participate in the activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of the death or injury or property damage that the minor may sustain while participating in the activity.

I HAVE CAREFULLY READ THE AGREEMENT, WAIVER AND RELEASE SET FORTH ON THIS PAGE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF, MEFIYI, AND DOUGLAS COUNTY AND I SIGN IT OF MY OWN FREE WILL.

Parent Name _____

Parent Signature _____

Date: _____

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/Covid-19 & Athletic Camps



The Novel corona virus, Covid-19, has been declared a worldwide pandemic by the World Health Organization. Covid-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Douglas County Parks and Recreation has put in place preventative measures to reduce the spread of Covid-19; however, we cannot guarantee that you or your children will not become infected with Covid-19. Further, attending the practices, participating in the sports camps, or volunteering could increase the risk of contracting Covid-19

By signing this agreement, I acknowledge the contagious nature of Covid-19 and voluntarily assume the risk that I, or my children may be exposed to or infected by Covid-19 by attending the events and such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by Covid-19 may result from the actions, omissions, or negligence of myself and others including, but not limited to DCPR employees, other athletes, volunteers or affiliates and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself, or my family member (including, but not limited to, personal injury disability and death), illness damage, loss, claim liability, or expense, of any kind, that I may experience or incur in connection with my attendance at the athletic events. On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless the County, its employees, agents, and representatives of and from the claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of DCPR, its employees, agents, and representatives weather a Covid-19 infection occurs before, during or after participation in any related services. My signature indicates I do not hold Douglas County and its employees of the Parks and Recreation Department accountable for any accidents or the spread of Covid-19 that may occur as a result of participation in the camp. The participant is physically qualified to attend the camp. I hereby authorize the Camp staff to act for me, according to their best judgement, in any medical emergency.

You enter and use our facilities and Sports camps at your own risk.

All Participants will have no-touch temperature check onsite. All participants are required to answer the following screening questions prior to participation. Circle your answer.

- | | | |
|--|-----|----|
| 1) Have you or your child been in close contact with a confirmed case of Covid-19? | Yes | No |
| 2) Are you or your child experiencing a cough, shortness of breath or sore throat? | Yes | No |
| 3) Have you or your child had a fever in the last 48 hours? | Yes | No |
| 4) Have you or your child experienced new loss of taste or smell? | Yes | No |
| 5) Have you or your child experienced vomiting or diarrhea in the last 24 hours? | Yes | No |

Signature of Athlete _____

Date: _____

Printed Name of Athlete _____

Signature of Parent/Guardian _____

Date: _____

Printed Name of Parent _____