



Tryout Form
Brigham Young University Athletics



Name: _____ Sport: _____

BYU ID#: _____ Birth Date: _____

Name of High School(s) Attended: _____

High School Graduation Date (Month/Year): _____

Are you currently enrolled as a full-time student (12+ credits) at BYU? Yes No

How many years have you been enrolled? One Two Three Four

Have you ever attended any other collegiate institution? Yes No

If yes, what institution(s)? _____

Have you registered with the NCAA Eligibility Center? Yes No

Have you had a medical exam/evaluation completed by a physician? Yes No

I understand that I may tryout with the above named team for a maximum of two weeks. I also understand that I cannot practice and/or participate with the team until I have been notified from the athletics compliance office that eligibility has been granted.

 Signature of Student Tryout

 Date

Full-time Student
 Physical Completed

The student named above has been approved to tryout with the team for a maximum of two weeks. He or she will be included on all rosters, the NCAA squad list and in other data used during the academic year if he/she becomes a member of the team. This student will not practice and/or participate until notification has been given from the athletics compliance office that eligibility has been granted.

 Signature of Head Coach or Designee

 Date

 Signature of Compliance Office

 Date

**LIABILITY RELEASE, WAIVER, AND INDEMNITY
BYU Football Tryout**

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. READ CAREFULLY.

I. RISKS/PRECAUTIONS

As required by the NCAA, the blood test results of a sickle cell anemia screen (which must be ordered by a physician) must be provided prior to trying out. [] (Initial)

In CONSIDERATION of my being permitted to participate in the BYU football tryout, I _____ (Print Name), agree to the terms of, and make the representations in, this Agreement. I am aware of the substantial risks involved with participating in football. These risks include, but are not limited to, personal property loss or damage, falls, collisions with other participants, the condition of the playing surfaces, and potential injuries like ACL, MCL, and other ligament tears, ankle and foot strains or sprains, torn or pulled calves and hamstrings, shoulder tendinitis, separation, or dislocation, muscle strains, neck and back injuries, concussions, bone fractures, lacerations, and other injuries with consequences as severe as paralysis or even death, whether foreseen or unforeseeable. **I RECOGNIZE THAT THESE RISKS ARE NOT AN INCLUSIVE LIST AND THAT THIS AGREEMENT COVERS ALL LISTED RISKS AND OTHER POSSIBLE RISKS ASSOCIATED WITH PLAYING FOOTBALL.** [] (Initial)

I am a healthy person, knowledgeable about the athletic abilities required to become a member of the BYU football team, and prepared to participate in this tryout. I will take all of the necessary precautions before participating in this tryout. In the event I suffer an injury, I agree to notify a staff member immediately and to take full responsibility for any medical supervision or care that may be necessary. I recognize that BYU may act as a first responder in the event of any accident or injury. I consent to any medical treatment that may be necessary or advisable in the event of injury or harm to me, and I grant permission to BYU to authorize emergency medical treatment and/or transportation, if BYU determines it is necessary. I understand and agree that BYU assumes no responsibility for any injury or damage that might arise out of or in connection with emergency medical treatment and/or transportation. I agree to be financially responsible for all expenses incurred in that treatment and/or transportation. Furthermore, I agree to abide by all instructions of those who oversee the athletic tryout, and I attest that I will not participate unless I am physically and medically fit and sufficiently trained to participate. [] (Initial)

II. RELEASE, WAIVER, COVENANT NOT TO SUE, AND AGREEMENT TO INDEMNIFY AND HOLD HARMLESS

I hereby RELEASE, WAIVE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND HOLD HARMLESS Brigham Young University, the Athletic Department of Brigham Young University, and any of their directors, officers, servants, agents, and employees (each a "Releasee" and, collectively, the "Releasees") for any liability, claim, demand, cost, expense, and/or cause of action arising out of or related to any loss, damage, or injury (physical, mental, emotional, or otherwise), including death, that occurs as a result of any Releasee's conduct or omission, including any negligent act and/or omission by any Releasee, in connection with my participation in any activities that are part of the BYU football tryout. [] (Initial)

I further agree that this Agreement will bind the members of my family and spouse, if I am alive, and my estate, executors and administrators, heirs, assigns, and personnel representatives if I am deceased, and shall be deemed as a liability release, waiver, and indemnity agreement in favor of the Releasees. In addition, I agree to pay any attorney fees or costs incurred by BYU in enforcing this Agreement. Further, I understand and acknowledge that BYU is not the insurer of my behavior, actions, or participation in the tryout. [] (Initial)

I have read the above information in its entirety. I sign this Agreement voluntarily, without relying upon any other representation, statement or inducements, apart from the foregoing written statements. I understand that BYU does not require me to participate in this tryout, but I want to do so, despite the possible dangers and risks and despite the legal and equitable rights I am relinquishing by signing this Agreement. I further state and represent that I am at least eighteen (18) years of age, fully competent to sign this Agreement, and fully intending to be bound by it. I understand that the Releasees are not liable for any injuries I sustain in conjunction with this tryout, unless it is caused by a Releasee's intentional conduct or gross negligence. I certify that the information I have provided in this document is true and correct to the best of my knowledge. If any portion of this Agreement is held to be invalid, illegal, unenforceable, or in conflict with any law governing this Agreement by a court of competent jurisdiction, the validity of the remaining portions shall not be affected. [] (Initial)

X _____ Date _____
(Participant's Signature)

X _____ Date _____
(Parent or Guardian Signature also required if participant is not eighteen years of age)

