

**FINGER LAKES YOUTH FOOTBALL
AND CHEERLEADING LEAGUE, INC.**

**Contract
2011**

Participant Information:

Name (Last, First, Middle) _____

Address _____

City/Town _____ State _____ Zip _____

Attach Picture

Phone _____

e-mail address: _____

School Attending: _____ Age (as of 8/1 this year) _____ Date of Birth _____

Player Cheerleader A-Team B-Team C-Team

Participated last year yes no

Participant Pledge

I will

- ◆ maintain good standing in school
- ◆ abide by officials' decisions
- ◆ show good sportsmanship
- ◆ refrain from using foul language
- ◆ not damage/deface property, buildings or equipment

Participants Signature / Date

Parents Permission to Participate

I understand that football is a contact sport and my child can be injured while participating as a "player" or "cheerleader" in practice and play of the sport as well as in traveling and other related activities incidental to my child's participation. I also understand that an injury may be of a minor or major variety.

In addition to giving full consent for my child to participate, I do hereby waive, release and hold harmless the organization named, its officers, coaches, sponsors, supervisors and representatives for any injury that may be suffered during the course of normal participation of this sport.

Parent Signature / Date

Procedure for Medical Attention

I, the undersigned, do hereby authorize officials of the Fingerlakes Youth Football and Cheerleading League to contact directly the persons named on this Contract Form, and do authorize an attending physician(s) to render such treatment as may be deemed necessary in an emergency, for the health of said child.

Required Signature of Parent or Guardian / Date

To Parent or Guardian: To serve your child in case of an accident, it is necessary that you furnish the following information for emergency cases. List neighbors or nearby relatives who will assume temporary care of your child if you cannot be reached;

Neighbor or Relative _____ Phone _____

Medical Coverage Information

The Fingerlakes Youth Football and Cheerleading League has accident insurance coverage for medical and hospital expenses with a \$250.00 deductible amount for each accident incurred. This insurance is a secondary coverage, following parent's own medical insurance coverage. Any injury that requires medical attention must be reported to team officials immediately and the proper claim forms filled out and submitted by the parent team of the Fingerlakes Youth Football and Cheerleading League.

FLYFCLI Certification

Certification Weight

Signature of FLYFCLI Official

ATTACH COPY
OF BIRTH CERTIFICATE
HERE

Physical Form

All players and cheerleaders are required to have a physical exam and or proof of a physical exam prior to August 1st of the current playing season and within the last 12 months.

Photo Release (web site, game program, end of season slide show): I, being parent/guardian of _____, hereby consent that the videotapes, photographs, and/or electronic images bearing his/her image, and/or audio recording made of his/her voice, may be used by the Jordan-Elbridge Youth Football and Cheerleading League, Inc., its assigns or successors, in whatever way they desire; furthermore, I hereby consent that such photographs, recordings, electronic images, website, and the tapes, and/or software from which they are made, shall be their property, and they shall have the right to duplicate, reproduce, and make other uses of such photographs, films, recordings, electronic image, and tapes as they may desire free and clear of any claim whatsoever on my part.

Parent's Signature / Date

Office Use Only:

Uniform Size: _____

Tackle Only

Helmet Size: _____ Weight: _____ lbs.

Cheer Only

Chest: _____ Waist: _____

Hips: _____ Shoe Size: _____

Fund Raising

Buy Out \$ _____

Fund Raiser 1 \$ _____

Fund Raiser 2 \$ _____

Registration Total: \$ _____

Check Number: _____

Receipt Number: _____

Date: _____

Balance Due: \$ _____

- Parent Participation
- Photo
- Birth Certificate
- Physical
- Medical Coverage / Number
- Contract Complete

check
here



if ready
to play