NORCAL YOUTH FOOTBALL AND CHEER

Player/Cheerleader Application

**Football**  **Cheer**

Team: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_Starts (6,7,8) \_\_\_\_ Mascots (4,5) \_\_\_\_ Rookies (8,9,10) (11)\_\_\_\_ Starts (6,7,8)

Previous Team: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ JV (10,11,12)(13) \_\_\_\_ Rookies (8,9,10)

\_\_\_\_ Varsity (12,13,14\*) \_\_\_\_ JV (10,11,12)

\_\_\_\_ Varsity (12,13,14\*)

\*Cannot turn 15 before November 19, 2017

ALL 8th grade football players MUST be on Varsity

Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing this application, I player/parent agrees to the following**:**

* I will follow the playing rules, as set forth by the NCYFC.
* I will follow any and all guidelines as set forth by my team.
* I will be responsible for returning/repairing/replacing all team equipment that is issued to me.
* I understand that I am a member of this team for the entire season, or until properly released.
* I understand that this team will be my home team from this point on, and that I must obtain an approved transfer from the league prior to going to another team.
* I understand that the league may handle problems and questions as directed, and that the outcome may not always go my way.
* I will not use, nor allow any person associated with me to use, foul language, obscene behavior, or un-sportsmanlike Gestures.
* I agree to act in an appropriate manner and to abide by all decisions of the coaching staff, executive board, league board, referees, or staff at all times.
* I agree to play any position that I am assigned to, and that I will represent my teams and coaching staffs decisions to the best of my ability.

By signing this application, I agree for my child and family to participate in a sport activity or an event sponsored by the NCYFC and the local team, its’ agents, Directors, employees, coaches, or staff. I represent that my child is in good physical and mental condition. I understand that football and cheerleading are dangerous sports and that I, my son, and/or daughter will participate at our own risk. I agree that the NCYFC and/or any of its franchise teams will not be held liable for any injury or damage arising from their participation in any NCYFC sponsored event or competition. This waiver applies to all persons or entities acting on my, or my child’s’, behalf. I have read this application in its entirety and I fully understand and agree with its terms. This authorization shall remain in effect for a period of 10 years from the date signed. I understand that participation in tackle football/flag football/cheerleading can be dangerous. Your child could be temporarily or permanently injured and I hereby give my consent for my child to participate and compete in the NCYFC. I also hereby waive my right to privacy, and give the NCYFC, and its’ authorized representatives the right to verify any and all information regarding our participation. I expressly give NCYFC permission to access my child’s school record for the express reason of verifying his age.

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Parent’s/Guardian’s Signature Participant Signature Date

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Signature of Team President Date