

Team Name: _____

Youth Football and Cheer

REGISTRATION FORM

Program: (FOOTBALL or CHEER) CIRCLE ONE

DIVISION FOR MIGHTY MITES (5, 6 & 7 YEARS OLD), PEEWEES (8 & 9 YEAR OLDS), JUNIORS (10 & 11 YEARS OLD) & SENIORS (12, 13 & 14 YEAR OLDS). **DETERMINED BY AGE OF MAY 1ST, A PLAYER IS ELIGIBLE TO BE A SENIOR IF HE/SHE IS 14 YEARS OLD BUT DOES NOT TURN 15 YEARS OLD BEFORE DECEMBER 1ST. (NO FRESHMAN)

MM ___ PW ___ JR ___ SR ___

CHILD'S NAME: _____ AGE _____ DOB _____

CHILD'S SCHOOL: _____ GRADE (2018) _____

FOOTBALL EXPERIENCE _____ FORMER TEAM NAME _____ PREVIOUS DIVISION _____

PARENT/GUARDIAN NAME: _____ RELATIONSHIP _____

ADDRESS _____ CITY _____ STATE _____ ZIP: _____

HOME PHONE: _____ WORK _____ CELL: _____

EMAIL ADDRESS: _____

PLEASE LIST 2 INDIVIDUALS TO CONTACT IN CASE OF EMERGENCY:

NAME: _____ RELATIONSHIP: _____ PHONE: _____

NAME: _____ RELATIONSHIP: _____ PHONE: _____

LIST ANY MEDICAL CONDITIONS: _____ CHILDS PHYSICAN _____

PLEASE LIST KNOWN ALLERGIES, ILLNESS OR PHYSICAL LIMITATIONS _____

PARTICIPANT RELEASE

I, _____, (please print) do solemnly swear that I am the Parent or legal guardian of _____ and that the above named player/cheerleader was born on ___/___/____. I understand that it is a misdemeanor for me to swear falsely and any such action will be prosecuted to the full extent of the law. I understand that the safety of the participant is the first importance to **Louisville Youth Football League and its Cheerleading programs**. I understand that in spite of all reasonable precautions, injuries can occur. Football is a collision sport and even the best equipment and training will sometimes not prevent an injury due to the many random factors involved in contact. I also understand that cheer leading has its risks as well. The law requires that parental permission be obtained for operative procedures on minors. I give permission for such transportation, diagnostic, therapeutic and operative procedures and transportation as many are deemed necessary for the participant. I, above said name give permission for the said child to participate in the Louisville Youth Football League and its cheer programs. In no way shall I hold LYFL, its agents, clusters, employees, referees, coaches and any other persons participating in said league liable for any injury or losses to myself or child while participating in this league and its programs. I fully understand that I am totally financially responsible for any and all equipment issued by **LYFL clusters and its Cheerleading programs** and return same promptly upon requested by these Youth Football organizations and Cheerleading programs.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

THE FEE FOR 2018 IS \$90, SIBLINGS ARE HALF PRICE