



# Framingham Youth Football and Cheerleading

PO Box 2571, Framingham MA 01703  
508-380-3610



## 2008 Registration Form for Football and Cheerleading

Please indicate which sport child will participate in:  Football  Cheerleading

**Please Note: Must use name as indicated on their birth certificate.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade in fall: \_\_\_\_ Weight (football only): \_\_\_\_ Female  Male

Parent/Guardian: \_\_\_\_\_ Work or Cell Phone: (\_\_\_\_) \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Work or Cell Phone: (\_\_\_\_) \_\_\_\_\_

Health Ins. Provider: \_\_\_\_\_ Policy #: \_\_\_\_\_ Physician's Phone: (\_\_\_\_) \_\_\_\_\_

Known Allergies/Medical Conditions: \_\_\_\_\_

**PARENT/GUARDIAN RELEASE INFORMATION**

- I/We, the parent/guardian of the above named candidate for a position on Framingham Youth Football and Cheerleading, hereby give approval for him/her to participate in any and all football/cheerleading activities, including transportation to and from activities.
- I/We, are aware that participation in football or cheerleading may result in serious injuries, and protective equipment does not protect against all injuries to participants and I do hereby waive, release, absolve, indemnify, and agree to hold harmless the local Youth League, Framingham Youth Football and Cheerleading and the Board of Directors, the organizers, sponsors, coaches, participants and persons transporting my/our child whether the result of negligence or any other cause. I/We grant permission for my child to receive emergency treatment whenever necessary while participating in Framingham Youth Football and Cheerleading activities. I/We understand that in an emergency, whenever possible, an attempt will be made to notify his/her legal guardian.
- I/We accept full responsibility for any equipment that my/our child is allowed to use, and will pay to replace any and all equipment lost or destroyed except through normal wear and tear. I/We will not alter the equipment in any way as to render the manufacturer's warranties null and void. I/We will return the equipment washed and cleaned promptly at the end of the season as requested by the team.
- I/We agree to **furnish an original and certified true copy with raised seal (not a photocopy)** of my/our child's birth certificate at the time of registration.
- I/We agree to **furnish a Statement of Physical Condition signed by a physician**, which states that my/our child is physically fit to participate in contact sports. The statement **must be dated after January 1, 2008** and furnished prior to the first day of practice. The participant will not be allowed to practice without this doctor note.
- I/We agree to allow Framingham Youth Football and Cheerleading to release photographs of my child for publicity in newspapers and on our web site. Individual children will not be identified in photos.
- I/We have read with my child the Framingham Youth Football and Cheerleading Zero Tolerance Policy, attached, and understand fully that if not followed could result in my child's termination from this program.**

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Registration Fee: \$165 for one child, \$120 for the second child, \$100 per additional child. Please make checks payable to FYFC and mail to address at top of page. **Parents/guardians must fill out one registration form for each participant. There will be no refunds given after August 15, 2008.**

Organization use only: Date Rec'd \_\_\_\_/\_\_\_\_/\_\_\_\_ Amt Rec'd \$ \_\_\_\_\_ Check # \_\_\_\_\_  
Cash