



AMERICAN YOUTH FOOTBALL

Participation, Tracking and ID Card - All-American Division



ASSOCIATION NAME - _____

ASSOCIATION

ASSOCIATION NAME	PLACE PHOTO / DMV / MILITARY ID CARD HERE
DIVISION OF PLAY - TEAM NAME	
PARTICIPANT NAME	
<div style="display: flex; justify-content: space-around;"> _____ _____ _____ </div> <p style="text-align: center;">JERSEY # Grade AGE (7/31)</p>	
PARTICIPANT PARENT/GUARDIAN NAME	
<div style="display: flex; justify-content: space-between;"> HOME PHONE WORK PHONE CELL PHONE </div>	

I, Hereby, With My Signature, Do Certify That The Information Below Has Been Collected And Verified By The Means, As A Minimum, As Instructed In The AYF National Rulebook And/Or Operations Manual, Current Version.

OFFICIAL PLAYER CERTIFICATION

LEAGUE USE ONLY

DATE OF BIRTH:	Age As of 7/31	GRADE / AGE CERTIFICATION	PARTICIPANT CONTRACT	MEDICAL CLEARANCE	WAIVER/ RELEASE	EMERGENCY MEDICAL / CONSENT	SCHOLASTICS
Month / Day / Year							

REGULAR SEASON

POST SEASON

	GAME DATE	PLAYER CHECK	CODE		GAME DATE	PLAYER CHECK	CODE
JAMBOREE				Week 11			
Week 1				Week 12			
Week 2				Week 13			
Week 3				Week 14			
Week 4				Week 15			
Week 5				Week 16			
Week 6				Week 17			
Week 7				Week 18			
Week 8				Week 19			
Week 9				Week 20			
Week 10				Week 21			

INSTRUCTIONS: PLAYER CHECK Will Enter Date, Verify The Identity, Of Each Participant, Initial Each Participant Card,

CODE: OK = Everything Verified, I = Sick/Injured, A = Absent / Dropped

ALL MUST BE CHECKED IN / VERIFIED PLAYING OR NOT / ENTER DETAIL UNDER 'CODE'

Participation Contract, Tracking and ID Card - Page 2

Last Name	First Name	Initial	Preferred (nick) Name	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Street Address	City / Town	State	Zip Code	Home Phone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Date Of Birth (M/D/YR)	Age as of 7/31	Parent/Guardian First Name	Parent/Guardian Last Name	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Grade in Fall	School in Fall	School Phone	Home Email Address	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Medical Insurance (circle one)	Name Of Insurance Carrier	Policy #		
<input style="width: 95%;" type="text"/> YES / NO	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		
Football: <input type="checkbox"/>	Cheer: <input type="checkbox"/>	--CHECK ONE --	Registration Fee: \$ <input style="width: 95%;" type="text"/>	Check# Cash: <input style="width: 95%;" type="text"/>

GRAY AREAS FOR OFFICIAL USE ONLY !!

Association: _____ Division: _____ Team: _____

Jersey Number Assigned: _____ Equipment / Uniform Issued Returned

PERMISSION TO PARTICIPATE I acknowledge that I am fully aware of the potential dangers of participation in any sport and I fully understand that participation in football, cheerleading, dance and/or step may result in SERIOUS INJURIES, PARALYSIS, PERMANENT DISABILITY AND/OR DEATH. Furthermore, I fully acknowledge and understand that protective equipment does not prevent all participant injuries. I, the parent/guardian of the above-named participant, do hereby give my approval for my child/ward to participate, and further assert that I have verified with my child/wards' physician, and in my opinion, my child/ward is physically fit and can participate without limitation in any and all Local, Regional, National, League/Conference, Association and team/squad activities, including transportation to and from the activities by a licensed driver.

SCHOLASTIC FITNESS Initial: _____
 I am of the opinion that my son/daughter/ward is scholastically fit and would benefit by participation in this program. I agree to submit a copy of my son/daughter/ward's last completed grade, end of year/last complete report card or a written statement of scholastic fitness from the school administration.

HELMET WAIVER (for football participants) Initial: _____
 We acknowledge, AND WE understand the risks involved in my CHILD/WARD, my playing FOOTBALL, which is a collision sport; the NOCSAE committee has adopted the following warning to be read by, and signed by, both the parent/guardian and participant. **DO NOT USE THIS HELMET TO BUTT, RAM OR SPEAR AN OPPOSING PLAYER, THIS IS IN VIOLATION OF FOOTBALL RULES AND CAN RESULT IN SEVERE HEAD, BRAIN OR NECK INJURY, PARALYSIS OR DEATH AND POSSIBLE INJURY TO YOUR OPPONENT, THERE IS A RISK THAT THESE INJURIES MAY ALSO OCCUR AS A RESULT OF AN ACCIDENTAL CONTACT WITHOUT INTENT TO BUTT, RAM OR SPEAR, NO HELMET CAN PREVENT ALL SUCH INJURIES.** "

EQUIPMENT UNIFORM RESPONSIBILITY Parent/Guardian Initial: _____ Player Initial: _____
 I assume full responsibility for any and all equipment/uniforms loaned to my child/ward and I agree to promptly return, upon request, the uniform and other equipment in as good condition as when received except for normal wear and tear. If I fail to adhere to this policy, I will be responsible for and promptly pay the replacement cost of such equipment.

CODE OF CONDUCT Initial: _____
 The Ideology Of Youth Sports Including This Program Is To Promote Good Understanding And Fundamental Knowledge Of The Sport. It Is Also Critical That Good Sportsmanship Including The Ability To Always Conduct Oneself In An Appropriate Manner Of Positive Accord Both On And Off The Field. It Is Understood That Any Incident Considered Detrimental To The Pursuit Of This Ideology Will Not Be Tolerated. It Will Be Addressed In Accordance With The Statutes Of The Association, Conference, Current National Affiliation, State and Local Laws, And May Result In Dismissal From The Program And The Inability To Participate In Any Future Related Activities Of The Association. This Code Of Conduct Applies To All Involved With The Program Including But Not Limited To, The Football Players, Cheerleaders, Spirit Participants, Parents And Guardians.

PRINT Parents/Guardian Name: _____ Parents/Guardian Signature: _____ Date Signed: _____

NOTE: This form as with any and all forms used by your Association should be reviewed by your local counsel for compliance with any state or local statutes. This form should be kept on file for a minimum of 7 years.

Emergency Medical Treatment, Consent and Information

The following information will be used in the event that a parent / legal guardian is not available. The purpose of this information is to provide a quick reference for medical personnel should the need arise. Please fill out this form completely. If a particular question is not applicable write "none", n/a, or other appropriate comment otherwise none will be assumed. If additional space is needed, please use the back of this form. All information disclosed here will be treated as confidential. It will be the responsibility of the parent/legal guardian to notify the participants coach and league/event officials if any information needs to be added, deleted, changed, or updated in any way.

ATHLETE INFORMATION				
Athlete's Name:		Nick Name:		Phone: ()
Address:		City:		State: Zip:
PARENT OR GUARDIAN INFORMATION				
Father's Name:				
Address:		City:		State: Zip:
Hm Phone: ()	Daytime Phone: ()		Email:	
Employer:				
Mother's Name:				
Address:		City:		State: Zip:
Hm Phone: ()	Daytime Phone: ()		Email:	
Employer:				
Guardian's Name:				
Address:		City:		State: Zip:
Hm Phone: ()	Daytime Phone: ()		Email:	
Employer:				
FAMILY MEDICAL INSURANCE				
Carrier:		Group:		
Policy #:		Group #:		
Policy Holder Name:				
Family Physician's Name:				
Dr's Address:		City:		State: Zip:
Phone: ()	Fax: ()		Email:	
EMERGENCY MEDICAL INFORMATION				
Preferred Hospital(s):				
EMERGENCY CONTACT:		Phone: ()		Relationship:
Please list any medical conditions (allergies, asthma, etc.) And medications being taken by the participant named above. Please list any other information you may deem relevant, and helpful to emergency medical personnel: (please note if no information is given and the words "none" or "n/a" is not filled in then, "none" will be assumed.				
Allergies:				
Medical Conditions:				
Other:				

*I Hereby my signature grant permission for my child/ward to participate in any and all, _____ (Association name) and, American Youth Football, Inc / American Youth Cheer dba, program(s) sanctioned event(s), be they official or un official, including but not limited to, athletic, social and/or fundraising activities. I further hereby consent to any and all health care providers, authorize any first aid, emergency treatment, including but not limited to transportation to and from health care facilities and/or any medical professional to provide treatment, order injections, hospitalize, give anesthesia or perform surgery. I understand that this authorization is given prior to any need for medical care, but given to avoid unnecessary delay in emergency treatment which the attendant and/or medical professional may deem advisable in the exercise of best judgment. I presume a reasonable attempt was made to contact me.

*Print Parent/Legal Guardian Name

*Signature Parent/Legal Guardian

*Date

The original Emergency Medical Treatment, Consent and Information form should travel with the coach and a copy should be kept at the administrative office of the sports organization. Due to privacy concerns, completed forms should be stored in a secure location with access restricted to those on a need to know basis for the purpose of medical care.



AMERICAN YOUTH FOOTBALL Waiver and Release of Liability - Minor



ASSOCIATION NAME - _____

READ BEFORE SIGNING

IN CONSIDERATION OF _____, my child/ward, being allowed to participate in the American Youth Football American Youth Cheer Regional/National Championships, and or the football and or cheer programs of _____, the Local Organization, which is a legally distinct and organization not operated or controlled by American Youth Football, despite its membership with American Youth Football, Inc. the undersigned acknowledges and agrees that:

- 1) The risk of injury to my child/ward, myself, from the activities involved in these programs is significant, including the potential for permanent disability, paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- 2) FOR MYSELF, SPOUSE, AND CHILD/WARD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for child/ward, participation; and,
- 3) I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant concern in my child/wards', readiness or, hazard during my presence or participation, and/or in the program itself, I will remove my, child/ward, from participation and bring such to the attention of the nearest official immediately; and,
- 4) I, for myself, my spouse, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS American Youth Football, Inc.(AYF), the local organization, their respective officers, directors, officials, volunteers, agents, and/or employees, other participants, sponsoring agencies, tournament host, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (RELEASEES), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, incident to my child/wards', involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, TO THE FULLEST EXTENT PERMITTED BY LAW.
- 5) I, for myself, my spouse, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my child/ward's involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Print Name of Parent/Guardian: _____

Parent/Guardian Signature: _____ Date Signed: _____

UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

Print Participant s Name: _____

Participant's Signature: _____ Date Signed: _____

NOTE: This form as with any and all forms used by your Association should be reviewed by your local counsel for compliance with any state or local statutes. This form should be kept on file for a minimum of 7 years, longer in the event of an injury. Please confer with your local attorney for advice as to the appropriate maintenance and storage term for this and all such forms.



AMERICAN YOUTH FOOTBALL



Image Release – MINOR

ASSOCIATION NAME - _____

READ BEFORE SIGNING

In consideration of (insert child's name) _____, my minor child/ward being allowed to participate in any way, in the American Youth Football, Inc. ("AYF") (dba American Youth Football and American Youth Cheer,) national championships and any other official AYF events and activities, the undersigned agrees that American Youth Football Inc., is hereby granted the unrestricted right and permission, free from approval or review, to copyright and/or use my child's/ward's likeness in all media now or hereafter known, including but not limited to, pictures and videos of my child which he/she may be included intact or in part for promotion or other commercial use.

Print Name of Parent/Guardian: _____

Parent/Guardian Signature: _____ Date Signed: _____

BARNEGAT JR BENGALS

YOUTH FOOTBALL AND CHEER

Refunds, Deposits, Work Bond and Equipment Return Policy

Refund Policy

- If you elect for your child to discontinue participation in the Barnegat Jr. Bengals program there will be no refund of registration fees.
- In the event of a child moving out of district, before the first official practice, a 50% refund will be issued.
- If a child moves out of district after the first official practice, there are no refunds.

Work Bond Deposit

- A parent/guardian of a Barnegat Jr. Bengals participant shall be required to provide a \$150.00 returnable deposit as a guarantee that they shall provide a total of six (6) hours of volunteer service PER CHILD to the league at one or more Barnegat Jr. Bengals events.
- It is the responsibility of each parent/guardian to request and coordinate their own work bond opportunities with the work bond coordinator. Work bond opportunities will be available before, and throughout the season.
- Work bond hours must be completed as such for each six (6) hours: mandatory two (2) hours practice concession, mandatory two (2) hours game concession, and the remaining two (2) hours must be completed in one of the following pre-approved areas – canning/fundraising, field work, or other approved opportunities as they arise.
- The \$150.00 work bond deposit check postdated November 1 of the current year is required to be provided at time of registration. This check will be held as a deposit and shall only be cashed if the parent or guardian fails to fulfill its six (6) hour volunteer commitment.

Equipment/Uniform Deposit

- A parent/guardian of a Barnegat Jr. Bengals participant shall be required to provide a \$150.00 returnable deposit as a guarantee that they shall properly maintain all equipment/uniforms throughout the season, and return all in full at the completion of each sport's respective season.
- Any equipment/uniforms that are returned damaged due to improper washing/cleaning, torn from a non-field activity, or stained from negligence or food products may be have to be paid for in full at the purchase price Barnegat Jr. Bengals paid for such equipment/uniform, if deposit does not cover said items.
- If equipment and/or uniform are damaged during practice or game, the player/cheerleader MUST report this immediately to their head coach.
- The \$150.00 equipment/uniform deposit check postdated November 1 of the current year is required to be provided at time of registration. This check will be held as a deposit and shall only be cashed if the parent or guardian fails properly maintain or return equipment and/or uniforms.

PARENT/GUARDIAN DATE

PARENT/GUARDIAN DATE

EXECUTIVE BOARD MEMBER DATE

BARNEGAT JR BENGALS

YOUTH FOOTBALL AND CHEER

Participant Code of Conduct

All participants are required to pledge prior to the season start to uphold player conduct expectations.

- I hereby pledge to be positive about my youth sports experience and to have fun during my experience. I will let my parents and coaches know if it stops being fun.
- I will encourage good sportsmanship from fellow players, coaches and parents at every game and practice by demonstrating good sportsmanship.
- I will attend every practice and game that I can, and will notify my coach if I cannot.
- I will do my best to listen and learn from my coaches.
- I will expect to receive a fair amount of playing time.
- I will treat my coaches, other players, officials and fans with respect regardless of race, creed or abilities and I will expect to be treated accordingly.
- I deserve to play in an environment that is free from drugs, tobacco and alcohol and expect adults to refrain from their use at all youth events.
- I will encourage my parents to be involved with my team in some capacity because it is important to me.
- I will do my very best in school.
- I will remember that youth sports are an opportunity to learn and have fun.

Parent/Guardian Code of Conduct

The overall success of the youth athlete is highly dependent on parental involvement and example. Parents play a critical role in shaping and supporting the athlete and respective success levels. As such, parents must also commit to a code of conduct. Inclusions of the Parent Code of Conduct are:

- I hereby pledge to provide positive support, care and encouragement for all children participating in youth sports.
- I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game, practice or other youth sports events.
- I will place the emotional and physical well-being of my child and other children ahead of any personal desire to win.
- I will insist that my child play in a safe and healthy environment.
- I will provide support for coaches and officials working with my child to provide a positive, enjoyable experience for all.
- I will have my child at every practice and game, prepared and on time, and will always have a parent/guardian present. My child will not be able to participate if a parent/guardian is not present at all events. If a circumstance does not allow my child to be present or participate, I will immediately notify the head coach.
- I will demand a drug, alcohol and tobacco-free sports environment for my child and agree to assist by refraining from their use at all youth sports events.
- I will remember that the game is for children and not for adults.
- I will do my very best to make youth sports fun for my child.
- I will ask my child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed or ability.
- I promise to help my child enjoy the youth sports experience within my personal constraints by assisting with coaching, being a respectful fan, providing transportation or whatever I am capable of doing.

In executing the Parent and Participant Code of Conduct agreement, I/we acknowledge and agree to abide by the principals, expectations, and requirements outlined herein. Failure to do so may result in disciplinary action deemed appropriate by the Barnegat Jr. Bengal Executive Board.

PARTICIPANT

DATE

PARENT/GUARDIAN

DATE

EXECUTIVE BOARD MEMBER

DATE

PARENT/GUARDIAN

DATE

BARNEGAT JR BENGALS

YOUTH FOOTBALL AND CHEER

Consent and Release

This shall acknowledge that I / We _____, residing in the Township of Barnegat, or other Town resident authorized by the Barnegat Jr Bengals Board of Directors to participate in Barnegat Jr. Bengals, within the County of Ocean and the State of New Jersey, in recognition of the benefit received for benefit of our child /children _____ and others gained through participation in Football or Cheerleading, do hereby relinquish and release the Barnegat Jr. Bengals under the supervision of the Barnegat Jr. Bengals Youth Football and Cheer Organization, it's organizers, sponsors, Board of Directors, coaches and volunteers of said team from and against any and all claims of liability and / or actions whatsoever arriving from, but not limited to, the transportation of the said team and / or the practicing, playing, coaching, supervising, equipment, operation, and management of said team during any and all Barnegat Jr. Bengals functions, activities, practices, games, Fall season or any subsequent season or function.

PARENT/GUARDIAN **DATE**

PARENT/GUARDIAN **DATE**

EXECUTIVE BOARD MEMBER **DATE**