



GREEN COUNTRY YOUTH FOOTBALL



Player Registration Form

Member Organization _____

Player's Name _____ Date _____

Address _____ City, State Zip _____

Age _____ Date of Birth _____ Grade _____ School _____

Player's Parents' Names _____

Cell Phone _____ Cell Phone _____

Home Phone _____ Other Phone _____

Email Address _____

Player's Height _____ Player's Weight _____

Tribal Member _____ Member of what Tribe _____

Release of Liability Contract

My child has my permission to participate in all Green Country Youth Football Association (GCYFA) sponsored or endorsed activities. GCYFA, its member organizations, its officers, Board Members, coaches, coaching staff, agents, and licensees are hereby released from any and all liability or responsibility for any injury that may occur to my child, to me, to my spouse, to any of my other children, resulting directly or indirectly from my child's participation in GCYFA activities including but not limited to league tournaments and practice games, practices, transportation to and from games, tournaments or otherwise, and the use of practice facilities, game facilities, concession facilities or any other facility. We shall abide by the rules and regulations of participation of GCYFA.

Authorization for Emergency Treatment

I hereby authorize any physician, surgeon or dentist on the medical staff of the nearest Emergency Medical Center to administer any emergency treatment, procedure or medicine necessary or advisable when accompanied by an adult; I further authorize my child (player's name) _____ to be transported to the nearest emergency room. I also authorize officials at Green Country Youth Football League to secure the use of an ambulance, if necessary, for transporting my child to the hospital, and/or to administer first aid treatment as necessary. I further agree to pay the hospital, doctors, and ambulance service for all services rendered to the above named patient. I request that this authorization remain in force until the end of the calendar year unless notified in writing of a change by me.

____ (Initials) Insurance Release – Please check appropriate box and complete required information.

My child is covered by the following medical / accidental insurance:

Insurance Co. Name _____

This is to certify that we have **NO INSURANCE** policy that will cover by child. However, he/she has my permission to participate in all Green Country Youth Football League activities.

____ (Initials) Rules and Regulations Contract

I have read the Member's Rules and Regulations, of which I have a copy, as stated by the Board of Directors for the Green Country Youth Football Association. I hereby agree to abide by said rules and regulations. I have also read and fully understand the penalties prescribed for violation or non-compliance of said rules and regulations and by my signature do agree to these terms and conditions.

I, _____ hereby authorize Green Country Youth Football Association(GCYFA) to verify what grade the above listed player is enrolled in at _____ Public Schools. My child is enrolled in the _____ grade for the _____ season. I am giving GCYFA the right to verify at any time and realize that any false information would lead to possible disciplinary action to said player and team by GCYFA.

Signatures/Parent or Guardian _____ Date _____

Payment is required before practice is allowed or equipment is handed out.

GCYFA/Member Organization use only:

Fee \$ _____ Amount Paid \$ _____ Check # _____

Member Organization Representative Signature _____



GREEN COUNTRY YOUTH FOOTBALL



Waiver of Liability, Release

For and in consideration of the undersigned participant's registration with GCYFA & _____ (Name of Organization) ("Organization") and being allowed to participate in events and member activities, participant and the parent(s) or legal guardian(s) of participant waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage or wrongful death occurring to participant or participant's parent(s) or legal guardian(s) arising out of participation in events, or sports, and/or activities incidental thereto, wherever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant and/or participant's parent(s) or legal guardian(s) may have are hereby waived, released and relinquished, and participant and participant's parent(s)/guardian(s) do so on behalf of their heirs, executors, administrators and assigns.

Participant and participant's parent(s)/guardian(s) acknowledge, understand and assume all risks relating to events or sports participation and activities incidental thereto, and understand that activities incidental thereto involve risks to participant's and participant's parent ('s)/guardian ('s) person including bodily injury, partial or total disability, paralysis and death, and damages which may arise therefrom and that we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant, participant's parent(s)/guardian(s) or the negligence of others, including the organization, its affiliates, members, event hosts, other participants, other parents and legal guardians, coaches, officials, sponsors, advertisers, owners and operators of the premises used to conduct any event and each of them, their officers, directors, agents and employees (collectively, "released"), and include risks arising from the conditions and use of facilities and related premises. I/We further acknowledge that there may be risks and dangers not known to us or not reasonably foreseeable at this time.

Participant and participant's parent(s)/guardian(s) acknowledge, understand and assume the risks, if any, arising from the conditions and use of facilities and related premises, whether as a participant or a spectator, including without limitation, the risks involved with participating in the Organization's activities. Participant and participant's parent(s)/guardian(s) further acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said facilities, for negligent selection of certain releases, or negligent supervision or instruction by releases.

Participant and participant's parent(s)/guardian(s) acknowledge, understand The Organization reserves the right to photograph facilities, activities and program participants for potential future use. All photos remain the property of the Organization and may be used for publicity and promotional services.

Consent to Medical Treatment of Minor: I hereby give my consent to have the above applicant treated by a physician or surgeon in case of sudden illness or injury while participating in the above event. It is understood that the Organization provides no medical insurance for such treatment under its liability insurance coverage. Medical benefits for such treatments/injuries may be provided with proof of medical coverage purchased through the Organization. The location of the activity or the nature of the illness or injury may require the use of emergency medical personnel.

Participant and participant's parent(s)/guardian(s) agree if any claim for personal injury or wrongful death is commenced against releases, he/she shall defend, indemnify and save harmless from any and all claims or causes of action by whomever or wherever made or presented for his/her personal injuries, property damage or wrongful death.

Participant and participant's parent(s)/guardian(s) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releases, that they are fully advised of the potential dangers and risks and understand these waivers and releases are necessary to allow the activities of the Organization to exist in its present form.

Participant Name (Print) Age Grade

Parent or Guardian Signature (since under 18) Date Signed



GREEN COUNTRY YOUTH FOOTBALL

Green Country Youth Football Parent/Participant Code of Conduct

The Green Country youth Football Association (GCYFA) and its Member Organizations are nonprofit organizations that are committed to providing all youth in Green Country the opportunity to play football in a safe and enjoyable environment. As part of this commitment, we will emphasize the fundamentals of football, teach sportsmanship, teamwork and the knowledge the youth will need to play football at the high school level.

Parents, Guardians, and their guests, shall:

- Not use abusive or profane language at any time.
- Not criticize players, cheerleaders, or coaches in front of teammates and spectators.
- Give constructive criticism during a private moment, never in front of other parents, players, officials, spectators, etc.
- Support your coach, and refrain from excessive "sideline coaching" from the stands.
- Not criticize an opposing team's players, cheerleaders, coaches, or fans by word of mouth or by gesture.
- Accept the decisions of game officials, as being called to the best of their ability, as fair and final.
- Do our best to make sure my child is present at all GCYFA/ Member Organization events, on time, well rested and fed.
- Be financially responsible for equipment and will protect and return all equipment.
- Not use tobacco products, consume alcoholic beverages, use or possess illegal substances on any fields, practice, or game where youngsters are present.
- Do our best to be present at ALL practices and games, have a representative there in my stead, or otherwise be available to represent by player(s) to the coaches or team mom.
- Remain, at all times, in the designated viewing areas at all GCYFA/Member Organization practices and games.
- Volunteer my time for the benefit of the League when asked.
- Agree to follow all rules and regulations of Green Country Youth Football Association/ Member Organization.
- Understand what grade my child is eligible to play in per League rules.
- Understand if any of the League rules or provisions are violated, GCYFA and its member organizations shall have the authority and obligation to impose a penalty on the participant and/or team.

Participants shall:

- Have fun!
- Be a good sports (win or lose), be honest, fair and always show good sportsmanship to all coaches, players, officials and fans.
- I will attend all scheduled practices and games. If unable to do so, I will contact by coach.
- If I have an unexcused absence, it will result in loss of playing time.
- I will respect my coaches and follow their directions to the best of my ability.
- I will work hard and do my best in school.
- I will respect and obey by parents/guardian.
- I will respect referees and opposing players and coaches at all times.
- I will not use profanity.
- I will encourage my teammates in a positive way, regardless of the circumstances.
- I will respect, protect and maintain my equipment.
- I will conduct myself in a way that reflects proudly upon the League, my community, my team, my parents, and myself.
- Agree to follow all rules and regulations of Green Country Youth Football Association and its member organization.

All participants, parents or guardians of children participating in GCYFA/Member Organization activities agree to abide by the following Code of Conduct. If any of these provisions are violated, the League or member organization has the authority and obligations to impose disciplinary actions and/or dismissal from the team.

Printed Name: _____ Parent/Guardian Signature: _____

Child's Name: _____ Grade: _____ Date Signed: _____