

Beverly Youth Football Registration Information

Print all pages and return filled out and signed along with a check
(See chart below for fees) to:

Beverly Midget Football
PO Box 332
Beverly, MA. 01915

Registration fees for Football and Cheerleading

1st Child is \$135.00

Each Additional Child is \$85.00 with a \$265.00 family maximum.

All participants will be responsible for a \$50.00 fundraising fee on top of their registration fee. Calendar distribution will be done the first week of practice, and proceeds from the sale of calendars are to be kept by seller.

There will be a 25.00 Late Registration Fee after July 1st

For more information contact Hank McLaughlin (978) 927-4079



NECYFL



NorthEast Conference Youth Football League

Association Name: BEVERLY
2011

- Football**
 Cheering

Name: _____
 First M Last

Address: _____

City: _____

Birth Date: _____

Mother: _____

Father: _____

Phone: _____

Phone: _____

Cell #: _____

Cell #: _____

Email: _____

Email: _____

Emergency Contact:

Name: _____

Relationship: _____

Phone: _____

Cell Phone: _____

Required Paperwork

Grade as of September of season _____

Birth Certificate

Final Report Card

Medical Release

Physical Form



Paid __ Cash__ Check #__

Fee to register: \$135.00

PARENTAL CONSENT

I, _____ give permission for my son/daughter, to participate in the NorthEast Conference Youth Football and Cheering Program.

RELEASE FROM LIABILITY

I agree to assume all risks and hazards incidental to participation on a football/cheerleading team, including transportation to and from the activities. I do hereby waive, release, absolve, indemnify and agree to hold harmless, NorthEast Conference Youth Football League, the local association, the officers, directors, sponsors, volunteers, participants and persons transporting my child to and from any and all team activities, for any claim arising out of an injury to my child, whether the result of negligence or any other cause.

MEDICAL RELEASE

Because your child is involved in an active sport, there may be an occasion when an injury occurs that requires medical treatment and we are unable to contact you. Please list alternative contacts and family doctors below.

Parent Name: _____
Family Physician: _____

If parent/legal guardian cannot be reached:
Name: _____ Telephone: _____
Relationship to participant: _____

Allergy or medical condition that we should know. Include medication your child uses regularly:

Allergies/Medical Conditions: _____
Medications: _____

I hereby grant permission to the Association to administer first aid, secure proper treatment and hospitalize my son/daughter in case of emergency, provided they are unable to communicate with me, and according to their best judgment. I acknowledge by my signature that I have read and accepted and agreed to this document.

Signature of Parent or Legal guardian

Print Name

Date

PHYSICAL FORM

Form must be completed only by a licensed medical professional
Form must be dated **AFTER July 31, 2010**

Participant's Name: _____

I hereby certify that I am a licensed state examiner and have examined the above named individual and understand that he/she will be involved in participating in youth football and/or cheering. I hereby swear and attest that this individual is physically fit and I have found no medical reason which would prevent this individual from safely participating in NorthEast Conference Youth activities. I am therefore clearing this individual for athletic participation without limitation.

Signed or Stamped: _____

Date: _____

Office Address: _____

Phone: _____

EQUIPMENT RESPONSIBILITY CONSENT *Please Initial For Full Consent []*

Your child will be issued equipment and uniforms for the upcoming season. This equipment has been thoroughly inspected and is in good condition. At the end of the season, all equipment must be returned in the condition that it was received. Football equipment shall be cleaned and returned and placed in a bag ready for return. Cheerleader's uniforms shall be cleaned and returned on a hanger.

Any equipment not returned, not cleaned as prescribed above, shall be the responsibility of the parent/guardian to reimburse Beverly Midget Football for the cost of cleaning and/or replacement of damaged or unreturned equipment. Replacement cost is \$350.00 for football equipment and \$200.00 for Cheering uniforms.

IMAGE RELEASE CONSENT *Please Initial For Full Consent []*

The undersigned agrees that Beverly Midget Football, American Youth Football Inc. and American Youth Cheer dba have the unrestricted and exclusive right and permission, free from approval or review, to copyright and use in all media now or hereafter know, 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.

Refund Policy: *Please Initial For Full Consent []*

There is a non refundable \$25.00 processing fee on all refunds, except for those refunds related to medical issue/on field injuries. Refund structure is below, and is not negotiable. There may be extenuating circumstances related to a refund that do not fit the below listed parameters. On those occasions, whether to issue a refund, and how much will be refunded, is subject to the approval of the Beverly Midget Football Board of Directors. All decisions by the Board are final.

Prior to equipment hand out – 100% minus processing fee.

Prior to teams being assigned – 75% minus processing fee.

After team assignment but prior to start of the season – 50% minus processing fee.

Start of the regular season – No refunds issued. Exception would be medical or injury issue that would require participant to miss remainder of the season. Depending upon when issue arose, a prorated refund would be issued, and would not be subject to processing fee. Proof of injury and disqualification for remainder of the season may be required.

If a participant is disqualified from the league for any issues related to conduct on or off the field, the participant will not be subject to a refund of any kind.