

**TYLER RED RAIDERS YOUTH FOOTBALL & CHEER ASSOCIATION
REGISTRATION FORM**

Legal Name of Athlete (must match birth certificate):

Last _____ First _____ Middle _____

Address _____ City _____ State _____ Zip _____

Birth date _____ School: _____ Grade Level: _____

Mailing Address if different from above: _____

Have you participated in tackle football before? YES NO

If "YES" please list team(s): _____

Name of Parent/Guardian _____ Relationship to athlete: _____

Address (if different from above) _____

City _____ State _____ Zip _____

Telephone – Home _____ Work _____ Cell _____

Email Address: _____

Emergency Contact Information (if the parent/guardian can not be reached):

Name _____ Relationship to Athlete _____

Telephone – Home _____ Work _____ Cell _____

FEES:

ACTIVITY	REGISTRATION	EQUIPMENT PACKAGE	GAME PANTS
FLAG FOOTBALL	\$85.00	NA	NA
FRESHMAN-JUNIOR	\$85.00	\$150.00	\$25.00

Equipment package includes – helmet, shoulder pads and practice pants. Game socks, practice and game jerseys and mouth guards are included in the registration fee. Players may use their own equipment as long as it meets TCYFL standards. We have negotiated a "package price" from a vendor, however you may be able to purchase items individually. **ALL PLAYERS USING THEIR OWN EQUIPMENT MUST PAY \$25.00 FOR GAME PANTS.**

Tyler Red Raiders Youth Football Association Use Only:

Registration Fees Paid \$ _____ CASH CHECK DATE: _____

Equipment Fee Paid \$ _____ CASH CHECK NA DATE: _____

Birth Certificate Provided YES NO

Player Code of Conduct Signed YES NO

Parent Code of Conduct Signed YES NO

Medical History Form Completed YES NO

Physical Exam Form Completed YES NO

Division of Play (circle one): Flag / Freshman / Sophomore / Junior

Weight at Time of Registration: _____

Proof of Scholastic Fitness verified? YES NO

Parental/Guardian Permission and Waiver

Participant Name: _____

1. PERMISSION TO PARTICIPATE: I, the parent/guardian of the above-named participant hereby acknowledge that my child is in good general health and I give my approval for my child to participate in any and all TRRYFA activities, including transportation to and from the activities by a licensed driver with proof of insurance.

2. INTENT TO INFORM: I acknowledge that I am fully aware of the potential dangers of participation in any sport and I fully understand that participation in football 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, and therefore I do hereby waive, release, absolve, indemnify, and agree to hold harmless the TRRYFA and TCYFL supervisors, participants, and persons transporting the above named participant to and from activities, from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.

3. EMERGENCY MEDICAL AUTHORIZATION: I hereby grant my permission for any and all emergency medical/dental treatment and/or first aid to be administered to my child/participant, including authorizing any medical treatment facility/hospital to administer emergency treatment, for any illness/injury/accident resulting from participation in any and all TRRYFA activities.

4. INSURANCE DISCLOSURE: I am aware that the TRRYFA carries group accident insurance which is considered secondary or excess for medical purposes to any and all valid insurance I possess is considered primary insurance. Furthermore, I agree to notify in writing my head coach and TRRYFA of any medical claim as a result of participation in TRRYFA as soon as reasonably possible. I understand that any registration fee paid does not constitute a direct premium for insurance and that a deductible(s) may apply.

5. FINANCIAL RESPONSIBILITY: I hereby stipulate that I have been advised by the TRRYFA of my rights, if any, to a refund in accordance with the local organization policies, and I have also been advised of my fundraising obligations for the entire season and agree to fully comply with those obligations.

RULES & REGULATIONS - By my signature below, I hereby stipulate that I have read, fully understand and voluntarily agree to all of the above:

Signature of Parent/Guardian _____

Print Full Legal Name _____

Signature of Participant _____

Print Full Legal Name _____

Date _____