



JYFL Participant Registration 2011
 P.O. Box 211409, Auke Bay, AK 99821
 www.juneaufootball.com

PARTICIPANT FULL NAME:
 LAST, _____ First, _____ Full Middle Name: _____

CIRCLE ONE PLEASE			
Football		Cheer	
Seniors (7 th /8 th grades)	\$190	Seniors (7 th /8 th grades)	\$190
Juniors (5 th /6 th grades)	\$175	Juniors (4 th -6 th grades)	\$175
Cubs (3 rd /4 th grades)	\$125	Cubs (1 st -3 rd grades)	\$125
Flag (K-2 nd grades)	\$50	Mascots \$25 w/Cheer Director approval	

***NOTE** \$7 of the registration fee is paid to the City & Borough of Juneau for a "use-maintenance fee."*

Physical address _____
 Mailing address _____
 Participant home phone: _____ Participant cell phone: _____
 Gender (circle) M F Birth date _____ Grade next school year: _____
 Primary Email address for your family: _____
 If you participated last year, on which team did you play? _____
 Do you have a brother or sister participating in JYFL?
 Yes NO If yes, please answer _____

Name	Grade	Cheer or Football

Parent/Guardian Information: Please provide primary and secondary contacts for the participant, i.e., the parent and grandparent or stepparent. If not applicable, leave blank.

Primary Contact Name

Mailing Address (if different than participant) _____
 Phones - Home _____ Work _____ Cell _____
 Email (if different than above) _____

Primary/Secondary Contact Name

Mailing Address (if different than participant) _____
 Phones - Home _____ Work _____ Cell _____
 Email (if different than above) _____
 Participant Email Address (if different than above) _____

LEAGUE USE ONLY

Check Amt	Check #	Cash Amt	CBJ:	JYFL:
Birth Cert Submitted (first year only)	Y N	Verify on file from previous participation in JYFL. DOB verified by Board member (initials)		
Physical Form Submitted	Y N	Date entered into League Organizer		By _____

*JYFL is partially funded by the City and Borough of Juneau through Sales Tax Revenue
 (Complete both sides of this form)*

JYFL Parent/Guardian Consent Form -- Read and Sign

The following requirements are mandatory for participation in the Juneau Youth Football League:

1. Prior to participating in activities and receiving uniforms and equipment, payment of registration fees or notice of receipt of scholarship must be submitted.
2. Participant division assignments are based on the participants' grade in the upcoming school year. Participants may be placed in an upper or lower division than their grade assignment based on demonstrated skills, experience, and ability with parent and board approval.
3. Parents/guardians accept financial responsibility for uniforms and equipment issued to the participant by the JYFL. Parents/guardians may be required to pay replacement costs for uniforms and equipment that is lost or damaged. **FORFEIT/ASSESSMENT OF DEPOSIT:** At the end of the season, equipment must be returned to the gear shed, not the team coach. Participants may be assessed a deposit the following year if their gear is not returned on time.

I/We give consent for _____ to participate in JYFL activities including but limited to practice, games, and local travel via parent or coach car pools. I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless the JYFL, organizers, sponsors, supervisors, participants, and any of its officers for injuries sustained in the activities of the JYFL, except to the amount covered by JYFL's accident or liability insurance.

I/We grant permission to publish the participant's photograph(s) of participation in JYFL league activities on the league's website, www.juneaufootball.com or other appropriate media JYFL deems appropriate (for example: Juneau Empire)

Parent/Guardian _____

Date _____

Consent for Medical Treatment

The JYFL requires that you give consent for medical treatment at Bartlett Regional Hospital or, in the event of an away game, at a hospital in that city. This ensures prompt treatment in case of an emergency.

I, _____ (parent/guardian) of _____ (participant) do give my consent for emergency treatment, hospitalization or other medical treatment as may be necessary for the welfare of my child, by a physician, qualified nurse, and/or hospital, in the event of injury or illness during all periods of time in which my child is away from his/her residence as a member of a JYFL team or squad, and waive on my behalf and on behalf of my child for any liability by the Juneau Youth Football League, a non-profit entity, and any of its officers, agents, or sponsors, arising out of such medical treatment.

Parent/Guardian _____

Date _____

Emergency Contact Name/Relationship to Player _____

Phone _____

Physician _____

Phone _____

Primary

Group # _____

Phone _____

Insurance: _____

Secondary

Group # _____

Phone _____

Insurance: _____

Note: Parental assistance with JYFL activities such as setting up fields, assistance with raffle sales, car pooling, housing out of town participants, etc. is encouraged and expected. You will be contacted to provide assistance. Thanks in advance for your help!