

# WORLAND YOUTH FOOTBALL LEAGUE 2016 REGISTRATION FORM (3<sup>rd</sup>-6<sup>th</sup> grade)

Football Player's Name \_\_\_\_\_  
 Address \_\_\_\_\_ Telephone # \_\_\_\_\_ - \_\_\_\_\_  
 City \_\_\_\_\_ Cell Phone # \_\_\_\_\_ - \_\_\_\_\_  
 Email \_\_\_\_\_

What grade will the youth football player be in fall of 2016? Circle one.    3<sup>rd</sup>    4<sup>th</sup>    5<sup>th</sup>    6<sup>th</sup>

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_  
 Phone # \_\_\_\_\_ - \_\_\_\_\_ Phone # \_\_\_\_\_ - \_\_\_\_\_  
 Is child covered under medical insurance? \_\_\_\_\_ Company? \_\_\_\_\_

Family Doctor \_\_\_\_\_ List any medical problem or prohibition player has \_\_\_\_\_

Person to notify in emergency OTHER THAN PARENT \_\_\_\_\_  
 Phone # \_\_\_\_\_ - \_\_\_\_\_

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the WYFL. Recognizing the possibility of physical injury associated with tackle football, I, hereby release, discharge and/or otherwise indemnify the WYFL and their associated personnel, including the owners of fields and facilities utilized for the Programs, against any claims by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

**CONSENT FOR MEDICAL TREATMENT**  
 As the parent or legal guardian of the above-named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

**X** \_\_\_\_\_  
**PARENT/GUARDIAN SIGNATURE**

League Fee of : \$55.00 (AFTER August 11th \$75.00)  
 Payable to: Worland Youth Football League

Equipment check out times are determined by order that paid registrations are received.

**T-Shirt Size** <Adult Sizes> XL \_\_\_\_\_ L \_\_\_\_\_ M \_\_\_\_\_ S \_\_\_\_\_  
 <Youth Sizes> L \_\_\_\_\_ M \_\_\_\_\_ S \_\_\_\_\_

**Preregistration**                      **June 15, 2016 - August 11, 2016 (Please turn into Community Center)**  
**Late Registration** \$75    **August 12<sup>th</sup> to the 18<sup>th</sup>.**  
**Equipment Deposit & Checkout** - **August 11<sup>th</sup> for pre-registration and August 18<sup>th</sup> for late registrations.**

{Equipment Check-Out Times will be posted August 10th at 8:00 AM @ WCCC} (Call Matt Schneider at 388-0461 with questions). (\$50.00 Check or Money Order due the night you check out equipment-Fully refundable after equipment returned at end of season.)