



Football & Cheerleading Registration Form 2010 Season



Player Information (Please Print Clearly)

Male

Female

 Legal Name (Last, First MI) must match birth certificate Date of Birth Capital City Bearcats
 Host Organization

 Address / City / Zip Code School Name/City

 Guardian Cell Phone (Important) Home Phone Work Phone

 Phone Number to receive text messages / email address

- Football Cheer Bearcat Stars (Cheer-All Star only)
 Flag (4-6) Rookies (7-8) Juniors (9-10) Seniors (11-12) *Ages are as of August 1st – All 4 years must sign a waiver*

Physical Examination Waiver

I, the Guardian of this child, believe to the best of my knowledge that he/she can withstand the rigors of a football or cheerleading season. I, the Guardian, believe there is nothing physically or mentally wrong with my child. I, the Guardian, hereby give my approval for my child to participate in the upcoming season **without** a physical examination which is recommended by the United Youth League of America (UYLA).

Does the child have any medical conditions that we would need to be aware of: example (asthma, food allergies, etc) _____ if so, are there any medications required :example (asthma pump, etc.

Guardian Signature: _____

Insurance Yes Child is covered by Legal Guardian's Medical Insurance No – Child is not covered by Legal Guardian's Medical Insurance.

I, the Guardian of this child, understand that as a league and any of its Organizations or branches do **NOT** provide Health/Injury Insurance.

Guardian Signature: _____

Guardian Understanding

Conduct: I understand that We are expected as Guardians to conduct ourselves in a civil manner at all UYLA events. **I understand that the consumption of alcohol and tobacco products is strictly prohibited at UYLA games and events.**

Parental Medical Treatment Authorization: In the event of injury to my child, I hereby grant authority to a qualified physician to render such medical treatment as said physician deems necessary under the circumstances.

Equipment Liability: The Guardians are responsible for returning all equipment and uniforms, clean and in good condition to the Capital City Bearcats. We the Guardians will be responsible for reimbursement to the host organization any cost of lost or excessively damaged equipment and or uniforms. _____ **Please Initial**

Waiver

I, the Guardian of the above named child, hereby give my approval to his/her participation in any and all UYLA Football/Cheer activities during the current season. I understand that football as well as cheerleading is a dangerous sport that may result in serious injury, permanent disability or even death. In consideration of my child being allowed to participate I assume all risks and hazards incidental to such participation known and unknown including transportation to and from such activities, and I do hereby waive, release, absolve, indemnity and agree to hold harmless the United Youth League of America (UYLA), the Host Organization, the sponsors, supervisors, participants, volunteers and persons transporting my child to and from activities for any claim arising out of negligence or injury to my child to the fullest extent permitted by law.

REFUND POLICY: No refunds on or after August 15th : _____
A \$30 charge for all returned checks **Please Initial**

I have read and understand everything on this form.

 Guardian Signature Relation Date

Mail Payment to: **PO Box 6944 Austin, TX 78762**

