

**Orange County Youth Football/Cheerleading League**  
**Registration Form: Adopted 1-10-06**

Date: \_\_\_\_\_

Players Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age on 11/30/2010: \_\_\_\_\_

Grade on 09/2010: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

School you will attend on 09/2010: \_\_\_\_\_

In Case of  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Any allergies, medications, or conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I-We the parents/guardians of the above named candidate for a position on a youth football team, hereby give my/our approval to participate in any and all youth football activities. I/We assume all risks and hazards incidental to such participation including to and from the activities; and I/We hereby waive, release, absolve, indemnify and agree to hold harmless the Orange County Youth Football League, the organizers, sponsors, managers, coaches, referees, league, board members, safety officer, announcer, timekeepers, supervisors, participants, and persons transporting my/our child to and from activities from any claim arising out of injury to my/our child whether the result of negligence or for any cause, except to the extent, and in the amount covered, by accident or liability insurance.

BIRTH CERTIFICATE REQUIRED AT TIME OF REGISTRATION. A SIGNED PARENT CODE OF CONDUCT AND A MEDICAL SIGNED AND DATED FOR THE CURRENT YEAR ARE ALSO REQUIRED TO BE ELIGIBLE TO PARTICIPATE IN THE OCYF/CL.

***Parent or Guardian Signature***

\_\_\_\_\_

-----Official Use Only-----

Football or Cheerleading  
(circle one)

Division: \_\_\_\_\_

Cash / Check #: \_\_\_\_\_  
( circle one – if check, write number )

Team Placement: \_\_\_\_\_

One copy of this form must go to each of the following: OCYFL, Local League, Parent/Guardian