

Registration to play Pelham Youth Football & Cheer for 2019
In-Person and Online- Registration April 22, 2019- June 1, 2019
Fitting Days-
May 15th- 5:00PM- 8:00PM June 1st- 9:00AM-12:00PM
Pelham Parks and Recreation Sports Line 205-358-0052
Card _____ Check# _____ Cash _____ Receipt # _____

Player's Last Name:		Player's First Name:			
Street Address:					
City:		State:	Zip:		
Home Phone Number:					
Birthdate:		FALL OF 2019 GRADE:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Male</td> <td style="width: 50%;">Female</td> </tr> </table>	Male	Female
Male	Female				
Participation in Pelham Youth Football & Cheer requires that you live within the City Limits of Pelham and that you are zoned to attend Pelham High School. Do you live within the City limits of Pelham and is your Player/Cheerleader zoned to attend Pelham High School?			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No
Yes	No				
Registration fees for the 2019 season are \$180.00 Cash, Check or Debit/Credit Card. A check made payable to the City of Pelham, debit card, credit card, or cash, should be included with the registration form. NO CHILD WILL BE ALLOWED TO REGISTER AFTER REGISTRATION IS COMPLETE AND ROSTERS ARE SET, unless league rules allow for additional registration. We will put a child on a waiting list if teams are full.					
I/We want our child to play up a GRADE LEVEL for the upcoming season, regardless of how he/she is rated. I further understand he/she will only be allowed to play up a Grade Level if I/We the parents submit the request in writing, and it is approved by the Pelham Youth Football & Cheerleading Board and the JSYFL board.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">N/A</td> <td style="width: 50%; text-align: center;">Yes</td> </tr> </table>	N/A	Yes
N/A	Yes				
I/We, the parent(s) of the above named candidate for a position on a Pelham Youth Football/Cheerleading team, hereby give my/our approval to participate in any and all Pelham Youth Football/Cheerleading activities, including transportation to and from the activities.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No
Yes	No				
I/We know that participation in football/cheerleading may result in serious injuries, and protective equipment does not prevent all injuries to players. I/we do hereby waive, release, absolve, indemnify, and agree to hold harmless the City of Pelham, the organizers, sponsors, participants, and persons transporting my/our child to and from activities for any claim arising out of any injury to my/our child, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No
Yes	No				
I/We also understand the Refund Policy: No refund will be made after a team has been certified by the league. If a participant requests refund prior to the season starting, then no more than 50% of the registration fee will be refunded unless otherwise approved by the Park & Recreation Director.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No
Yes	No				
I agree to allow the City of Pelham to use any forms of media for the City of Pelham website or any other sites promoting Pelham Youth Football/Cheerleading. All websites will be approved by the Park and Recreation Director.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No
Yes	No				
Please list the School that your child currently attends:					
List any email addresses at which you would like to receive league or team mailings:					
Print Name (Father):		Print Name (Mother):			
Signature:		Signature:			
Date:		Date:			
Work Number:	Cell Phone:	Work Number:	Cell Phone:		
PLEASE COMPLETE THE MEDICAL RELEASE FORM ON THE NEXT PAGE					

**Pelham Youth Football/Cheerleading Medical Release Form
2019 Season**

Player's Last Name:

Player's First Name:

Parent or Guardian Authorization:

In case of an emergency, if I, or the family physician, cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, First Responder, ER Physician).

Family Physician:

Phone:

Address:

City:

Hospital Preference:

In Case of Emergency, contact:

Name:

Work Phone:

Relationship to Player:

Home Phone:

Cell Phone:

Additional Contact Information:

Name:

Work Phone:

Relationship to Player:

Home Phone:

Cell Phone:

Additional Contact Information:

Please list any allergies/medical problems, including those requiring maintenance medications (i.e. diabetic, asthma, seizure disorder). Include medical diagnosis, medication, dosage, and frequency of dosage.

Allergies:

The purpose of the above listed information is to ensure that medical personnel have details of any medical concern, which may interfere with or alter treatment.

WARNING: Protective equipment cannot prevent all injuries a player might receive while participating in football/cheerleading.

Authorized Parent/Guardian Signature:

Date

