

Fort Bend Youth Football League (FBYFL) – 2009 SEASON



AS OF September 1, 2009: Age: _____, Date of birth: _____
Grade your child be in September 1, 2009 _____

F.B.Y.F.L. approval signature: _____

Once a participants' application is submitted and accepted by a franchise the participant cannot move to another franchise during the current year.

Applicant's Name: _____
 Name of school: _____ FBYFL Level played in 2008: _____
 Father's Name: _____ Occupation: _____
 Work number: _____ Cell number: _____
 Mother's Name: _____ Occupation: _____
 Work number: _____ Cell number: _____
 Address (City/zip code): _____

Home Telephone: (____) _____ - _____ E-mail address: _____
 In case of emergency, whom can we contact? (Name, Relationship, phone number, **not yourself**):

Physician Name: _____ Phone number: _____
 Allergies: _____
 Medications: _____
 Insurance company: _____
 Insurance Policy Number: _____ Telephone number _____

* No participant may play or be enrolled in any other organized football league while participating in the Fort Bend Youth Football League.

* Participants shall be allowed to play football under the following age, maximum weight or minimum weight standards. **F.B.Y.F.L. Board of Directors assignment decision to a specified level is final and "non-appealable"!**

	Flag	Freshman	Sophomore	Junior	Senior
Age	5, 6	7, 8	8*, 9, 10 ^a	9*, 10, 11 ^b	10*, 11, 12 ^c
Max Weight	100 lbs	120 lbs	140 lbs	155 lbs	175 lbs
			* - btw 120 -140	* - btw 140 -155	* - btw 155 -175
			a - 4 th grade, 1 st yr player only	b - 5 th grade, 1 st yr player only	c - not eligible if played as 6 th grader in 2008

Parent/guardian initials: _____ **Note:** parent/s or legal guardian/s must initial above showing his/her approval if participant is under the minimum weight of 50 pounds prior to being allowed to participate in FBYFL's program.

Fees to participate:

Football: Flag \$150.00	Contact Football: \$295.00	Cheerleading \$150.00
No Refund will be allowed after 4/30/2009		

I certify that (a) I am the parent/guardian of the above named applicant:(b) the above information is correct to all respects: (c) I will adhere to all stipulations as set forth below. I further certify that I acknowledge the right of FBYFL to suspend my son's/daughter's activities in its program through its own volition should the need arise: (d) I agree to abide by all FBYFL rules and regulations and further agree that all determinations made by the FBYFL in it's discretion shall be final. All disputes will be resolved through binding arbitration pursuant to the American Association of Arbiters.

Parents/guardians authorization, release an indemnifying agreement

We, the parents/guardian of the above named applicant for a position on First Colony Patriots Football/Cheerleading Team, hereby give approval for his/her participation in any and all activities concerning the assigned team for the current season. We assume all risks and hazards incidental to such participation including transportation to and from the activities and so hereby waive, release, absolve, and indemnify and agree to hold harmless all FBYFL board members, all sponsors, franchise board members, or participants in any and all activities of the team of FBYFL activities, for any claim arising out of injury to the above named applicant, whether the result of negligence or for any other reason. We also grant permission to the supervisors, managing personnel, or other representative to authorize and obtain medical care from any licensed physician, hospital or medical clinic, should the applicant become ill or injured while participating in activities away from home or at any other time when neither parent nor guardian is available to grant authorization for emergency treatment.

Parent/Guardian acknowledges that tackle football is a contact sport and has a risk of injury associated with it. Although participants are initially divided into different levels based upon age, weight, and grade, weight fluctuations are likely to occur during the course of the season. Parent/Guardian specifically assumes all risk on behalf of each participant and agrees to indemnify and hold harmless Fort Bend Youth Football League and individual franchise directors, members and coaches from all injuries to participants including such injuries which are the result of negligence or gross negligence on the part of league or franchise members, directors or coaches.

Assumption of liability

I, the undersigned parent/s/guardian/s of the above named applicant, do hereby assume liability for and agree to pay the cost of any and all equipment issued to said applicant which is lost or returned to the organization in a damaged condition not attributable to normal game guidelines, in the judgment of the organizations president, should be final in this respect and that the total value of all equipment issued to said applicant is \$225 for football applicant, \$100 for Flag applicant and \$100 for cheerleader applicant.

* Parent / guardian signature on this application gives approval for a picture to be taken of the participant to be used for identification purposes only!

Signature of parent/guardian: _____ **Date:** _____

First Colony Patriots approved signature: _____ **Date:** _____

Two (2) hard copies of birth certificate, two (2) photos and two (2) copies of THIS applications are ALL required to be considered for registration submission. No exceptions will be allowed! Any lack of the above items will remove your child from consideration until ALL items are submitted.

Method of Payment _____

If Credit Card, type: _____

Amount Paid _____

No. _____

Payment Date _____

Exp. _____ **CVS** _____