	ern Youth Football League - Registration Care	NVEL LISE ONLY	
		Initials: Date: for	
Level/Te		(Do not initial until all known deficiencies are corrected)	
	PLAYER INFORMATION (Please Print Clearly!)	Franchise Certification of Player Eligibility	
Player Name:		(To be completed by Authorized Franchise Representative Only!) The Franchise certifies the players date of birth, age, level, weight	
Address:		and jersey # as follows:	
City:	Zip Code:	Date of Birth: Age (as of Sept 1st):	
Home Phone:	Father Cell: Mother Cell:	Grade (as of Sept 1st): Waiver: □Yes □No	
E-Mail Address:		Cheer Level: Mascot Freshman JV	
<u>elease of Liability and Assu</u> n consideration of my ch	<i>umption of Risk</i> : nild named above being allowed to participate in the Northern Youth	Football Level: Freshman	
•	, the undersigned(s), being the lawful parent(s) and/or guardians of the		
above named minor, for myself, spouse and my child/ward knowingly and freely assume all		Weight(lbs): Jersey#: (weight is with player wearing all football equipment but without helmet)	
risks, both known and unknown and assume full responsibility for my child/ward's participation. I hereby release, hold harmless and agree to indemnify and defend the NYFL and its affiliated franchises from any and all liabilities with respect to any and all injury, disability, death, incident to my child/ward's involvement or participation in the NYFL. I hereby certify that all the information provided is accurate and that I have read the Release of Liability and Assumption of Risk			
		Authorized Franchise Representative ("AFR"):	
		AFR Name (print):	
		AFR Signature:	
	lerstand its terms and by signing this form I have given up substantial rights and I ntarily without any inducement. I grant permission to the NYFL and its affiliated		
franchises to use photographs of my child/ward for promotional purposes without any remuneration. I acknowledge that I have read the NYFL Football and/or Cheerleading rules, which <i>are available on the NYFL website, and agree to be bound by the rules contained therein.</i>		Franchise to	
		Place Player	
ire available on the WITL we	costie, una agree to be bound by the rules contained therein.	Picture Here	
Parent/Guardian		(Please tape, glue or staple)	
ignature:	Date Signed:	(Fieuse inpe, give or supre)	
Parent/Guardian Name (please print):		For football players the photograph must show	
Parent/Guardian Email Address:		the player from the waist up, showing players face without a helmet and showing the	
EMERGENCY CONTACT	INFORMATION:	players jersey number clearly.	
Primary Contact:	Relationship:		
Phone #:	Other #:		
econdary Contact:	Relationship:		
Phone #:	Other #:		
	ulsified registration information, physical and/or birth certificate is subject to immediate WWW.NYFL.NET		

<u>NYFL USE ONLY!</u>	Place 'X'			
Initials: Date:	here in ink for X-Man			
(Do not initial until all known deficiencies are corrected)				
Franchise Certification of Player Eligibility (To be completed by Authorized Franchise Representative Only!) The Franchise certifies the players date of birth, age, level, weight, and jersey # as follows:				
Date of Birth: Age (as of Sept	1st):			
Grade (as of Sept 1st): Waiver:	□Yes □No			
Cheer Level: Mascot Freshman JV				
Football Level: Freshman JV				
Weight(lbs): Jersey#: (weight is with player wearing all football equipment but without helmet)				
Authorized Franchise Representative ("AFR"):				
AFR Name (print):				
AFR Signature:				
Franchise to				

Place Player
Picture Here
(Please tape, glue or staple)