

FALL TACKLE FOOTBALL REGISTRATION 2009

BASTROP YOUTH FOOTBALL ORGANIZATION

P.O. Box 847
Bastrop, TX 78602

Child's Full Name: _____ Birth Date: _____

Address: _____ City, State, Zip: _____

Phone: _____ Age as of July 31, 2009 _____

Weight: _____ Jersey Size: _____ Pants Size: _____

PLEASE NOTE THAT UNIFORMS WILL BE ORDERED BASED ON SIZES PROVIDED.

Mother's Name: _____ Address: _____

Home: _____ Work: _____ Cell: _____ E-mail: _____

Father's Name: _____ Address: _____

Home: _____ Work: _____ Cell: _____ E-mail: _____

Emergency Contact (Other than Parents) Name and #: _____

How did you hear about us? Newspaper ___ Banner ___ Flyer ___ Friend ___ Other ___

Would you like to make a contribution to the BYFO Scholarship Fund? _____

If yes, please circle the amount \$5 \$10 \$15 \$20 \$25 \$50 \$75 \$100 \$125 \$150 \$175 \$200

I am the parent/guardian of the above said participant. I give my approval for said participant to participate in any and all football/cheerleading activities.

I understand that participation in football/cheerleading may result in serious injury. I do hereby waive, release, absolve, indemnify, and agree to not hold Bastrop Youth Football Organization, the organizers, board members, sponsors, coaches, supervisors, officials, participants and/or any person transporting my child to and from activities for any claim arising out of an injury to my child, whether the result of negligence or for any other cause except to the extent and the amount covered by accident or liability insurance.

I understand that I must return a signed Parent Behavior Form along with the completed Registration Form. I will furnish a completed medical physical form, copy of certified birth certificate, and small photo to the BYFO officials. I understand that my child will not be able to participate until all completed paperwork and payment is provided.

I understand that I will need to participate in a fundraiser yet to be determined by Bastrop Youth Football Organization.

I also agree to volunteer my time to work the concession stand of home games at least once during the season.

I understand that no refunds will be given.

By clicking below, I attest that I have read and agree to registration. I understand that all fees related to registration are due at this time.

Signature of Parent/Guardian _____ Date _____

Are you interested in coaching or volunteering? YES NO

If Yes, what are you interested in? _____