

MUST BE FILLED OUT BY PROGRAM

Area _____



H.B.C.Y.F.L.

2009 Official Registration Form

COPY
PICTURE

YOU MUST HAVE THE FOLLOWING TO BE ID'd:

1. This form must be filled out completely.
2. Original Birth Certificate, or a Certified Copy with a Raised Seal, or HB ID (no Xerox copies, Hospital Notifications of Birth or Baptism Certificates accepted.)
3. \$5.00 CASH ONLY! (No checks).
4. ID CARD (below) with TYPED INFORMATION (no hand written cards). Balance of form may be hand written.

ALL INFORMATION BELOW MUST BE COMPLETED BY PARENT/GUARDIAN

Player's
Last Name _____ First _____ M.I. _____

Address _____ City/State _____ Zip _____

Birth Date _____ Age (as of 7/31/09) _____ Grade in September _____

School _____ Height _____ Weight _____

Sex _____ Did this player play tackle football last Season? _____ YES _____ NO

If the player played last season Name of program _____

Insurance Co. and Policy # _____

PARENT/GUARDIAN INFORMATION
PLAYER LIVES WITH MOTHER _____ FATHER _____ GUARDIAN _____

Mother's Full Name _____

Address _____ City/State _____ Zip _____

Home Phone _____ Work Phone _____

Father's Full Name _____

Address (only if different from above)

_____ City/State _____ Zip _____

Home Phone _____ Work Phone _____

I hereby certify that all the above information is true, and I will assume any and all risk and liability in the above player's participation in this youth football program. I also agree to return all equipment that is issued or will pay for its replacement.

Parent/Guardian Signature _____ Date _____

DO NOT HAND WRITE BELOW THIS LINE

- ID CARD BELOW MUST BE TYPED

ID #09-

Date:

Fee Paid:

OLDER but LIGHTER (circle if applies)

TACKLE to TACKLE (circle if applies)

H.B.C.Y.F.L. 2009-2011 ID. CARD	
#09	
PHOTO	(area)
	(player's name)
	(date of birth)
	[] JOBL [] T-T