

2010 Southeast Idaho Youth Football League Registration Form

(Any falsification will result in suspension of participation from program)

Today's Date _____

This is to certify that _____ Parent Home Phone _____
Participant's Name
 _____ Idaho _____ Work Phone _____
Street Address **City** **Zip**

Birth Date: Month ____ Day ____ Year ____ **Years of age on September 1st, 2010** (_____ yrs old).

is physically qualified to participate in the Southeast Idaho Youth Football League (SIYFL) and that we, the parents or guardian, will not hold the administrators of the SIYFL, the coaches, volunteers, or sponsors responsible for any injury sustained during the scheduled games, practices or transportation thereto, or hold the SIYFL, their officials, volunteers or agents, liable for seeking or obtaining aid and assistance, to include hospitalization, medical aid or ambulance service, for participants who are believed to be injured or hurt.

The participation in sports involves some risk to its participants. SIYFL, through its uses of specially adapted rules, regulations, and protective equipment, helps to minimize these risks. However, participants and their parents or guardian must accept personal and financial responsibility for the risks associated with these sports. A parent or guardian should assess the medical and physical condition of the child prior to the start of the season. SIYFL provides excess medical insurance only. The plan benefits are payable for covered expenses not covered and payable by any other plan providing medical expense benefits, including medical trusts. I acknowledge, by signing, that I will provide medical insurance for my child. I also do not hold the League or its directors/officers liable for medical expenses that may occur.

I understand that the SIYFL permits the participant to use the below mentioned equipment at no charge. I agree to maintain and return the equipment in the same condition as it was issued (except for normal wear and tear). The League reserves the right to determine the status of said equipment. I also agree that in the event any of the below equipment is damaged, lost, or stolen, I am held responsible for its replacement cost. I also understand that if the equipment is not returned by Equipment Return Date, I am held responsible for the entire cost of the below issued equipment.

No refunds will be made after the first day of practice. All fees and birth certificate are due on Equipment Issue Day.

Mail Registration Form to: Southeast Idaho Youth Football, P.O. Box 1303, Pocatello, ID 83204.

Notes:	<hr style="border: 1px solid black;"/> Parent or Guardian Signature
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Grade Assignment during season: 4 th 5 th 6 th 7 th 8 th <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Home School Did you participate in the SIYFL program last year? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, what team? _____ As a parent would you be interested in: Coaching: No <input type="checkbox"/> Yes <input type="checkbox"/> Playing Time Monitor: No <input type="checkbox"/> Yes <input type="checkbox"/>	Pocatello/Chubbuck area (see map on back), City or School boundary you live within: <table style="width: 100%; border: none;"> <tr> <td>___ American Falls</td> <td>___ Snake River</td> </tr> <tr> <td>___ Aberdeen</td> <td>___ Soda Springs</td> </tr> <tr> <td>___ Bear Lake</td> <td>___ North Century High</td> </tr> <tr> <td>___ N.W. Blackfoot</td> <td>___ South Century High</td> </tr> <tr> <td>___ S.E. Blackfoot</td> <td>___ North Pocatello High</td> </tr> <tr> <td>___ Fort Hall</td> <td>___ South Pocatello High</td> </tr> <tr> <td>___ Marsh Valley</td> <td>___ East Highland High</td> </tr> <tr> <td>___ Preston</td> <td>___ West Highland High</td> </tr> </table> Notes: _____ _____ _____	___ American Falls	___ Snake River	___ Aberdeen	___ Soda Springs	___ Bear Lake	___ North Century High	___ N.W. Blackfoot	___ South Century High	___ S.E. Blackfoot	___ North Pocatello High	___ Fort Hall	___ South Pocatello High	___ Marsh Valley	___ East Highland High	___ Preston	___ West Highland High	<i>League Use Only:</i> Registered by: _____ Paid By: \$92 Registration Fee <input type="checkbox"/> Not Paid <input type="checkbox"/> Cash Check # _____ Proof of Birth: Yes <input type="checkbox"/> No <input type="checkbox"/> Comments: _____ _____
___ American Falls	___ Snake River																	
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Equipment Leased to Participant

Team: _____

Number: _____

Weight: _____

Equipment Check/Comment: _____

Total Replacement Cost if Damaged, Lost, or Stolen = \$180.00

Item	Price	Item	Price	Item	Price
Jersey	\$50.00	Shoulder Pad	\$35.00	Pads (7)	\$10.00
Helmet w/pads/strap	\$65.00	Pants	\$15.00	Belt	\$5.00
Mouthpiece	\$ N/C				