

**Orange County Youth Football/Cheerleading League  
Cornwall Youth Football/ Cheerleading  
P.O. Box 148  
Cornwall, NY 12518  
Registration Form 2010**

Date: \_\_\_\_\_  
Players Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Email: \_\_\_\_\_  
Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Childs' Date of Birth: \_\_\_\_\_ Age on 11/30/10 \_\_\_\_\_  
Grade on 09/20/10 \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
School child will attend on 09/20/10 \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION:**

Child lives with (circle one) Mother      Father      Both Parents

Mother's Name: \_\_\_\_\_ Mother's Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Mother's Cell #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Father's Cell #: \_\_\_\_\_

In Case of Emergency Contact Name & Relation: \_\_\_\_\_

Emergency Phone Number(s): \_\_\_\_\_

Any allergies, medications, or conditions: \_\_\_\_\_

I-We the parents/guardians of the above named candidate for a position on a youth football team, hereby give my/our approval to participate in any and all youth football activities. I/We assume all risks and hazards incidental to such participation including to and from the activities: and I/We hereby waive, release, absolve, indemnify and agree to hold harmless the Orange County Youth Football League, the organizers, sponsors, managers, coaches, referees, league, board members, safety officer, announcer, timekeepers, supervisors, participants, and persons transporting your child to and from activities from any claim arising out of injury to my/our child whether the result of negligence or for any cause, except to the extent, and in the amount covered, by accident or liability insurance.

**BIRTH CERTIFICATE REQUIRED AT TIME OF REGISTRATION. A SIGNED PARENT CODE OF CONDUCT AND A MEDICAL, SIGNED AND DATED FOR THE CURRENT YEAR ARE ALSO REQUIRED TO BE ELIGIBLE TO PARTICIPATE IN THE OCYF/CL.**

*Parent or Guardian Signature*

\_\_\_\_\_

-----Official Use Only-----

Football or Cheerleading (Circle one)      Division: \_\_\_\_\_  
Cash / Check #: \_\_\_\_\_      Team Placement: \_\_\_\_\_  
(Circle one - if check, write number)

One copy of this form must go to each of the following: OCYFL (white), local league (yellow), parent/guardian (pink)