Central Coast Youth Football League-Independent Youth Football League and Cheerleading Program

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For League Use Only:	Docs. Received - CC	YFL Physical Form	: Fundraise	er Agreement:	
Registration Fee:	Birth Certificate: Parent Agreement: Scholastic Player entry:				
Check #		Years	child has played org	ganized football:	
Cash	Birthdate:	Division:	_ Height:	Weight:	
Is player within the chap	pter boundaries? Yes [] No □			
Siblings playing:					
If your chapter allows: Sa					
Explain:					
	Regis	stration Informatio			
Child's Name					
	ast	First	Middle	e	
Child's Address:					
St	reet	City		Zip	
Last School attended:			Grade in (during play	ing season):	
School attended during pl	aying season:				
Mother's Name:		Home phone:	e phone: Work phone:		
Father's Name:		Home phone Work phone:		ork phone:	
Email Address:					
If not living together, whi	ch parent does child live	with?			
EMERGENCY CONTACT:		EM	EMERGENCY PHONE NO.:		
If your child participated	with CCYFL last season	, what team/squad was	s he/she on?		
	ne draft instead of returni ed at signup time, and if y This does not mean you	you check the box, you	ı must have a letter i	nto your chapter before	
	Pa	arent's Statement			
of birth is a legal documer Supplying a false legal do I declare unde	nt(s) which must be certif	ied under penalty of penalty of penalty has been altered is er the laws of the State	erjury under the laws a criminal offense (le of California that the	ne information	
_	20	in	County,	CA	
Signature of Parent/Legal Guardian			Date		
Organization Representatives Signature			Date of sign up		