REGISTRATION FORM

200__

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

For League Use Only:	Docs. Received – Co	CYFL Physical Form:	Fundraiser Agreement:	
Registration Fee:	Birth Certificate:	Parent Agreemen	t: Scholastic Player entry:	
		Years o	hild has played organized football:	
Check #	Birthdate:	Division:	Height: Weight:	
Cash				
Siblings playing:				
-				
Explain:				
Registration Information				
Child's Name				
La	st	First	Middle	
Child's Address:Str	reet	City	Zip	
		•	rade in (during playing season):	
			337 1 1	
			Work phone:	
Father's Name:		Home phone	Work phone:	
Email Address:				
If not living together, which parent does child live with?				
EMERGENCY CONTACT:		EM	EMERGENCY PHONE NO.:	
If your child participated v	with CCYFL last seasor	n, what team/squad was	he/she on?	
I request my child enter the draft instead of returning to the same team/squad from last year: (check here) The box must be checked at signup time, and if you check the box, you must have a letter into your chapter before August 1st, saying why. This does not mean you will go into the draft; it is up to each chapter to grant this request.				
Parent's Statement				
of birth is a legal documen Supplying a false legal doc I declare unde	it(s) which must be certicument, or a document r penalty of perjury und	fied under penalty of pe that has been altered is	nponent of this is the player's birthdate. Proof rjury under the laws of the State of California. a criminal offense (Penal Code Section 470). of California that the information cument was executed in	
	20	in	County, CA	
Signature of Parent/Legal Guardian			Date	
Organization Representatives Signature			Date of sign up	