



W.K.C.Y.F. 2010 PARTICIPANT APPLICATION

PO Box 673, Silver Lake, WI 53170

Program:
Please circle one

Tackle Flag Cheerleading

Participant's Name _____ Birth Date _____ age (as of 9-1-10) _____ Grade (as of 9-1-10) _____ Participant's Weight (Football Only) _____

Participant's Street Address _____ Apartment # _____ City _____ State _____ Zip _____ Email Address _____

Name of person participant resides with: Mother _____ Father _____ Both _____ Legal Guardian _____ Please circle one
Residence Phone _____ Other Phone _____

Alternate address _____ Apartment # _____ City _____ State _____ Zip _____ Email Address _____

Grade School Enrolled In _____ High School District residing in _____

Please list any siblings participating in the W.K.C.Y.F. and the levels / divisions that they are participating in: _____

I/We, the parent(s) or legal guardian(s) of the above named candidate for participation in the Western Kenosha County Youth Football League, hereby give my/our approval to participate in any and all W.K.C.Y.F. sponsored events, any league affiliate sponsored events, which includes transportation to and from events.

I/We know that participation in Football may result in serious injury, and that protective equipment does not prevent all injuries to players, and I/we do hereby for ourselves, executors, our heirs and administrators do hereby waive, release, absolve, indemnify and agree to hold harmless the W.K.C.Y.F. Bulldogs, all league affiliates, the organizers, board of directors, coaches, sponsors, supervisors, participants and persons transporting my/our child to and from activities for any claim arising out of any injury to my/our child, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance. I/we waive, release, and forever discharge any and all rights and claims for damages which I/we may or which hereafter accrue to my/our child, against the W.K.C.Y.F. Bulldogs, league affiliates, sponsors, administrators of the playing field, or all their respective officers, agents or representatives, successors, and/or assigns for any and all damages which may be sustained and suffered by my/our child in connection with his/her said association with or entry and/or arising out of his/her traveling to, participating in, and return from said League games or exhibitions conducted during the season. By signing our/my signature below, I/we are fully aware that I/we are responsible for all injuries that may occur to my/our child. I/we acknowledge that the league recommends, but does not require a physical exam prior to participation.

Father's Name: _____ Signature: _____ Date _____
 Mother's Name: _____ Signature: _____ Date _____
 Guardian's Name: _____ Signature: _____ Date _____

_____(Please initial here) I/We agree to return upon request the uniform and other equipment issued to my/our child in as good a condition as when received except for normal wear and tear and reimbursement of lost equipment at replacement cost will be paid to the W.K.C.Y.F. Bulldogs.

_____(Please initial here) I/We agree to provide a certified birth certificate of the above named candidate to League Officials. Failure to do so will result in the inability for my/our Child to participate in any league activities.

_____(Please initial here) I/We understand the W.K.C.Y.F. will from time to time use the name, photograph and/or video of the athlete in newspaper articles or marketing material which includes but is not limited to the W.K.C.Y.F. website and I/we consent to such uses and waive all rights to compensation.

Please indicate any physical limitations (asthma, allergies, allergic to bee stings, hearing, sight, etc.): _____

Name of family hospitalization plan: _____ Physician: _____ Phone #: (_____) _____

Emergency Contact: _____ Phone #: (_____) _____ Other Phone #: (_____) _____

Fees: Tackle: \$250.00; \$150.00 due at registration. Remaining \$100.00 is due at equipment handout. Registration after equipment handout, the fee is \$275.00
 Flag: \$125 due at registration.

Cheer: \$125 plus \$100 deposit towards purchase of new uniform (if needed) is due at registration; remainder due at uniform distribution in late July.
 Cheer uniforms are non-refundable once specially ordered for participant.

Refund policy: 75% up to equipment handout 50% up to first day of practice 0% after first day of practice except for cases of injuries

Parent(s) are required to volunteer up to 2 hours at one of the Bulldogs home games. Please check 2 activities you would like to volunteer for.

Concessions _____ Chain Gang _____ Field Setup _____ Post Game Clean-up _____ Team Mom/Dad _____ Clock _____ Coaching _____

LEAGUE USE ONLY

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|---|------|----------|-----------------------------|-------------------------------|--------------|---------------------|-----------------|-----------|------------|------|
| Registration Fee Due \$250 tackle (\$275 after EH), \$125 Flag, \$125 Cheer | \$ | Initials | Level of Participation | FLAG | BANTAM | FEATHER | MIDDLE | LIGHT WT | HEAVY WT | |
| Uniform Deposit (Cheer Only) | \$ | Initials | Birth Certificate Received: | YES | NO | (Please Circle) | | | | |
| Cheer Camp Deposit (Cheer Only) | \$ | Initials | Team on last year: | Pac | Mac | Big | (Please Circle) | | | |
| < Payment Amount > | - \$ | Initials | Fundraiser tickets recv'd | Parents sign here for tickets | | Ticket Numbers here | | | | |
| < Fundraising amount > | - \$ | Initials | Equipment Issue & Turn-in | | | | | | | |
| Final Amount due | \$ | Initials | Size or Check | Helmet | Shoulder Pad | Practice Pant | Game Pants | Knee pads | Thigh pads | Belt |
| Final payment amount due \$ _____ | \$ | Initials | Check Returned | | | | | | | |
| Date paid: | | | | | | | | | | |