YOUTH SPORTS FOUNDATION

Cresco 2016

Youth Sports Foundation
2923 Cedar Street Suite 3
Muscatine, IA 52761
563-288-2541
www.youthsportsfoundtion.org

PLEASE PRINT CLEARLY-MUST BE COMPLETED BY PARENT/GUARDIAN Date: _____

Player First Name _____ Last Name_____

Mailing Address _____ Home Phone _____

City _____State _____ Zip _____ Age _____ Date of Birth _____

Grade Fall 2016 _____ School 2016 _____ YSF Team 2015 _____

Does your child have any medical conditions the league should know about? Yes / No (Please list & include any medications)

_____

Parent/Guardian (print clearly) _____

Email

Cell Phone: _____ relationship to player _____

Emergency Contact secondary to parent: _____

relationship to player _____ Cell/Day Phone _____

T-SHIRT SIZE: YOUTH SIZE: M L **ADULT SIZE:** S M L XL 2XL 3XL

Player Code of Ethics

I HEREBY PLEDGE…

- To show respect for myself, my team, coaches, and the sport I am participating in.
- To maintain a clean lifestyle by: eating a balanced diet, staying away from all drugs and alcohol, and avoiding improper language.
- To conduct myself appropriately and remember that I am a representative of my team and community.
- To be courteous to the other team, on and off the playing area.
- To show respect for all officials and their decisions.
- To keep up with my school work and not allow sporting activities to become more important than my education.
- To do my best and have fun in youth sports.
- I understand that the equipment given to me is NOT mine to keep, and I will take proper care of this equipment while it is in my possession.

I will remember that winning can only be a good thing if we can win with respect and know how to lose with dignity.

_____
Player Signature

STAFF USE ONLY:

Player Weight: _____ Helmet Brand: **Riddell** Helmet Size: **X SMALL** **SM/MED** **L/XL**

Shoulder Pad **PT: 80 100 120 140 160 PRO36L** Pant Size: _____ Waist:_____ /Inseam: _____

(OVER)

Parent Code of Ethics

I HEREBY PLEDGE…

- To provide positive support, care and encouragement for my child participating in youth sports.
- To show good sportsmanship for all players, coaches, and officials at every game, practice, and other events.
- To place the emotional and physical well-being of my child ahead of my personal desire to win.
- I will support the coach by encouraging equal playing time for all players.
- I will talk with my child about treating others with respect regardless of race, sex, creed, ability, or family economics.
- I will demand that all practices and game fields are free from drugs, tobacco, and alcohol; improper language and conduct; and I will refrain from their use at all games and practices.

I will remember that the game is for the youth and NOT the adults. I will do my best to make youth sports fun for my child.

YSF Waiver

1. In consideration of being allowed to participate in any way in the Youth Sports Foundation football program, the undersigned acknowledges, appreciates, and agrees that:
   a. There exists a risk of injury. All players need to be aware that this sport does involve risk of injury. All instructions given by the coach must be followed.
   b. The Youth Sports Foundation and its coaches are NOT liable or responsible for a medical, dental, or hospital bill occurring as a result of injuries sustained by a player while participating in this league. All injury-related expenses shall be the responsibility of the player's parent/legal guardian.

INITIAL ONE

_____ I have insurance that will pay for medical expense if my son/daughter is injured while participating in this sport.

_____ I do NOT have insurance for my son/daughter and understand the YOUTH SPORTS FOUNDATION is NOT responsible and WILL NOT PAY any doctor, hospital, or medical expense if my son/daughter is injured while participating in this sport.

2. I understand that I am responsible for all YSF equipment (helmet, pants, pads, shoulder pads, and game & practice jerseys) and its upkeep while in my child's possession. I am responsible for returning the equipment in satisfactory condition at the end of the season. I understand that I will be charged any additional fee if equipment is NOT returned in a satisfactory condition. (beyond normal wear).
3. We may use your child's last name and jersey number on the YSF website. Contact YSF office for any questions.

_____ _____

Signature of Parent/Guardian (First & Last Name) Print: First/Last Name

MAKE CHECKS PAYABLE TO: Youth Sports Foundation or YSF

FEE (Cost) ***The Youth Sports Foundation charges a standard fee of $150 for 5th-6th grade. After June 1st YSF fee will be $175. The Cresco fee will be $100. We will have fundraisers to pay for the additional $50. If you would like a payment plan contact Bill Caffrey, (563) 547-3230. Thank You.***

LATE FEE: ($25) _____ **applied April 4, 2016**

Cash: _____

Check: _____ # _____

LATE FEE: ($50) _____ **applied June 1, 2016**

Chinstrap: _____ Adams_____ Riddell _____ - YES received / NO SEND

Other: _____

TOTAL: $ _____

$15.00 service fee on all returned checks

CREDIT CARD PAYENTS: ***This portion of the registration will be destroyed after processing card***

TOTAL CHARGE: $_____ **Expiration Date:** _____

Name on Card: _____ **Zip Code:**_____

Signature: _____

Card Number: Security Code: _____