



Youth Sports Foundation  
 2923 Cedar St. Ste. #3  
 Muscatine, IA 52761  
 www.youthsportsfoundation.org

**2012 REGISTRATION FORM**

**PLEASE PRINT CLEARLY - FILLED OUT BY PARENT OR GUARDIAN** Today's Date: \_\_\_\_\_

Player **FIRST NAME:** \_\_\_\_\_ **LAST** \_\_\_\_\_ **Male / Female**

**Mailing Address:** \_\_\_\_\_ **Home Phone:** (\_\_\_\_) \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Grade Next Fall 2012:** \_\_\_\_\_ **School:** \_\_\_\_\_ **YSF Team 2011** \_\_\_\_\_

**Does your child have any medical conditions the league should know about?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Please list:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Cell Phone:** (\_\_\_\_) \_\_\_\_\_

**EMAIL #1:** \_\_\_\_\_ **EMAIL #2:** \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ **RELATIONSHIP TO 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 and parents 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 any 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 expenses 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 expenses 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, game jersey and practice jersey) and its upkeep while in my child's possession. I am responsible for returning the equipment in a satisfactory condition at the end of the season. I understand that I will be charged an additional fee if this equipment is NOT returned or Not returned in a satisfactory condition. (beyond normal wear)
3. We may use your child's last name and jersey number on the YSF and Cresco website. Contact YSF office for any questions.

\_\_\_\_\_  
Signature of parent/guardian (first and last name)

PRINT NAME

**T-SHIRT SIZE**     Youth 14-16    (ADULT)  Small     Medium     Large     X-Large     XX-Large

**STAFF USE ONLY**

**Weight:** \_\_\_\_\_ **Helmet:** \_\_\_\_\_ **Pant Size:** \_\_\_\_\_ **Shoulder Pad:** \_\_\_\_\_ **Height:** \_\_\_\_\_

**PLAYER'S CODE OF ETHICS**

**I HEREBY PLEDGE...**

- To show respect for myself, my team, my coaches, and the sport I am participating in.
- To maintain a clean life style 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 teams, on and off the playing area.
- To show respect for all officials and their decisions.
- To keep up with my schoolwork 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's Signature

**PARENT'S 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 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 practice and game fields are free from drugs, tobacco and alcohol, improper language or 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.

\_\_\_\_\_  
Parent Signature

**MAKE CHECKS PAYABLE TO: YOUTH SPORTS FOUNDATION or YSF**

**Fee: \$65.00**

**\$75.00 (after April 2<sup>nd</sup>)**

**\$85.00 (after May 25<sup>th</sup>)**

**Chinstrap fee is \$10.00.**

Cash : \_\_\_\_\_

Check: \_\_\_\_\_ # \_\_\_\_\_

Chin-Strap: \_\_\_\_\_

**Received -- YES / SEND**

Other: \_\_\_\_\_

**TOTAL:** \_\_\_\_\_

**\$15.00 service fee on all returned checks.**

**PAYMENT PLAN APPROVED BY YSF COORDINATOR.  
\$40.00 DEPOSIT REQUIRED AT REGISTRATION.**

**\$50.00 DEPOSIT AFTER APRIL 2, 2012.**

**By signing this section I am agreeing to the payment plan set forth by the Youth Sports Foundation. I understand that I will be sent one invoice in the amount of \$25.00 each, for a total amount of \$65.00. I promise to pay the amount in full within the next 60 days in order for my child to be eligible to participate.**

\_\_\_\_\_  
Participant signature

Paid: \_\_\_\_\_

Owes: \_\_\_\_\_

\_\_\_\_\_  
YSF Representative Name

**NO PAYMENT PLANS ACCEPTED AFTER MAY 25, 2012.**