



Washtenaw Junior Football, Inc.

Registration Checklist: Participant and Parent/Guardian must present ALL of the following, in-person, to be eligible for roster placement

- . Parent/Guardian Contact information sheet and player sizing information **Completed (player/cheer sizing will occur at registration- participant must be present.**
- . Downriver Junior Football League Registration Form **completed and signed**
- . DJFL Consent for Medical Treatment **signed before an official Notary Public (We will have a Notary Public present at registration-\$5 fee to WJF is required for this service at registration)**
- . DJFL Medical History Information Form **completed and signed by Parent/Guardian**
- . Parent Release Form for Media Recording **completed and signed by Parent/Guardian**
- . **Photocopy of Player/Cheerleader Birth Certificate** must be attached (Please cross out parent's social security number on photocopy) **AND bring the original birth certificate so we may verify it. It must be the official copy from the governing authority with a seal on it.** Only photocopy will be retained
- . Physician Authorization (see DJFL registration form) must be signed or copy of signed physical exam or sports physical provided must be **dated** on/after 4/15/11. **This must be received by registrar at REGISTRATION** to hold a place on roster.
- . Registration fee paid in full (Football: \$275, Cheer: \$75). Payment may be in cash, check or money order made payable to "WJF", or credit card (**VISA or MasterCard**) **(Please note: Fee for returned checks or declined credit card payments = \$25 fee plus loss of roster placement; participant will be placed at bottom of waitlist with no guarantee of roster placement)**
- . Volunteer Service Time **\$40 REFUNDABLE** deposit **PER FAMILY (Cash or Money Order only!)**
- . **Signed** "Hold Harmless" statement
- . **Signed** "Family Commitment/ Conduct Agreement"

Please note that if you have had bounced checks in the past with WJF, WJF will not accept a check from you for payment. You must bring cash or a cashiers check.

No Partial paperwork will be accepted!!!



Washtenaw Junior Football, Inc. Parent/Guardian Contact Information

Football Player

Cheerleader
(Circle one)

Cheer Mascot

Blue

Maize

Participant Last Name: _____ First Name: _____

Parent/Guardian:

Parent/Guardian:

Name: _____

Name: _____

Cell Phone: _____

Cell Phone: _____

e-mail address: _____

e-mail address: _____

(The e-mail address is an important piece of contact information. Coaches, team parent and unit e-mails are frequently used to share important team information)

Participant Sizing for Uniform Fitting:

Football Players Only:

Weight: _____

Cheerleader (to be completed at registration):

Chest/Bust (inches): _____ Waist (at belly button-inches): _____

Inseam(Inches): _____

Shoe Size (check one) _____ Adult _____ Children's _____ Size

Back length (Neckline to waist-inches): _____

Arm Length (Armpit to wrist- inches): _____

Parent/Guardian:

Name: _____

Cell Phone: _____

e-mail address: _____

DOWNRIVER JUNIOR FOOTBALL LEAGUE REGISTRATION FORM

PLEASE PRINT

NAME _____

ADDRESS _____

CITY _____

ZIP CODE _____

PHONE _____

BIRTH DATE _____

AGE _____

SCHOOL DISTRICT & NAME OF SCHOOL CHILD ATTENDS _____

NAME OF PARENT / GUARDIAN _____

EMAIL ADDRESS (OPTIONAL): _____

=====
Did your child play football or cheer last year? _____

YES

NO

If yes, on what unit? _____

And what team? _____

=====
I / we, the parent(s) of a candidate for a _____ position a team of the Downriver Junior Football League, hereby give my / our approval to his participation in any and all of the League's activities during the current season. I / we assume all risk and hazards incidental to such participation, including transportation to and from the activities; and I / we do hereby waive, release, indemnify, and agree to hold harmless the local team, the Downriver Junior Football League, the organizers, sponsors, supervisors, participants, and persons transporting my / our child to or from activities from any claim arising out of any injury to my / our child, except to the extent covered by accident or liability insurance. I / we also grant consent to the home team physician to render whatever emergency medical care he has deemed necessary in the event of an injury to my / our child.

I / we hereby certify that the birth certificate or other proof of age used in the registration of my / our child is true and correct. I / we fully understand that should other wise be proved true, all of the games in which my / our child participates will be forfeited.

FURTHER, I / we agree that, if my / our child makes the team and is issued team equipment, I / we will be responsible for said equipment as follows: Immediate return of all issued equipment upon demand. Further, I / we will pay for (at team cost) any and all equipment lost, destroyed or not returned.

FURTHER, I / we agree to furnish my / our child with the prescribed shoes, socks, and supporter and such other personal equipment as is necessary for his / her health and safety,

NOTE: Must be signed by parent or guardian.

PARENT / GUARDIAN

DOWNRIVER JUNIOR FOOTBALL LEAGUE REGISTRATION FORM

CONSENT FOR MEDICAL TREATMENT

MEDICAL CONSENT

I, _____ parent of _____ a minor child, hereby voluntarily consent to the administration of such anesthetics and the performance of such operations on said minor child as the anesthetist-in-charge and the surgeon-in-charge, respectively, may deem necessary, or advise, when said minor child is admitted to any hospital or clinic for emergency medical treatment.

Subscribed and sworn to before me on this _____ day of _____ 20_____

NOTARY PUBLIC

_____ County, Michigan

My commission expires _____

Parent / Guardian

REGISTRATION INFORMATION

=====

League Age _____ Weight _____ Unit and Team Assignment _____

Number of Previous Seasons of Participation _____

I have examined the birth record of this child and find it accurate as indicated.

Registrar

=====

I have examined this child and it is my considered opinion that he / she does not have any physical defect or impairment which will prevent him / her from participating in the sport of football or cheerleading.

Name and address of Physician

Signed _____

Examining Physician

Date _____

PHYSICIAN AUTHORIZATION

EQUIPMENT ISSUE

Practice Jersey _____ Game Jersey _____ Helmet _____

Parka _____ Game Pants _____ Practice Pants _____ Game Socks _____

Shoulder Pads _____ Knee Pads _____ Thigh Pads _____ Girdle Pads _____

Skirt _____ Pants _____ Sweater _____ Shoes _____

Date Returned _____

Parent / Guardian

Date _____

DOWNRIVER JUNIOR FOOTBALL LEAGUE MEDICAL HISTORY & INFORMATION

Child Name: _____ Date: _____
 Street Address: _____ D.O.B: _____
 City: _____ Telephone: _____

EMERGENCY CONTACT (S):

Name: _____ Name: _____
 Relationship: _____ Relationship: _____
 Telephone: _____ Telephone: _____

FAMILY INSURANCE INFORMATION:

Insurance Company: _____ Policy Number: _____
 Policy Holder: _____ Telephone Number: _____
 Family Medical Insurance coverage in effect at this time: Yes No

Please complete the following: If the answer to any question is or was yes, please describe. Please describe the problem and it's implications for proper first aid treatment on the back of this form. Has the child had, or does the child currently have:

Head Injury (concussion, etc.)	Y	N	Fainting Spells	Y	N
Convulsions / Epilepsy	Y	N	Asthma	Y	N
Neck or Back Injury	Y	N	Hernia	Y	N
High Blood Pressure	Y	N	Diabetes	Y	N
Kidney Problems	Y	N	Heart Murmur	Y	N
Poor Vision	Y	N	Poor Hearing	Y	N
Allergies	Y	N	Other: _____		

Has the child had, or does the child currently have injuries to:

Shoulder	Y	N	Knee	Y	N	Ankle or Leg	Y	N
Finger	Y	N	Arms	Y	N	Back or Neck	Y	N

Is the child currently taking any medication? Y N
 If Yes, what and why: _____

LIST ANY CURENT RESTRICTIONS CURRENTLY PLACED ON THE CHILD'S ACTIVITIES AT THE DIRECTION OF HIS OR HER DOCTOR OR OTHER MEDICAL CARE PROVIDER: _____

Parent / Guardian (Print): _____
 Parent / Guardian (Sign): _____ Date: _____



**Washtenaw Junior Football, Inc.
Parent Release Form for Media Recording**

I, the undersigned, do hereby grant permission to Washtenaw Jr. Football to use the image of my child, _____ .

Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, yearbooks, and digital images such as those on the Washtenaw Jr. Football Web site.

I give permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by Washtenaw Jr. Football for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any materials used in communication targeted externally (outside of WJF).

Parent/Guardian signature: _____

Date: _____

Please make a copy of this form for your own records.

If you have questions, please feel free to contact Kristy Czech at footballmomandddad@hotmail.com.



**Washtenaw Junior Football, Inc.
Approval to Participate/Hold Harmless Agreement**

I, the undersigned, having carefully reviewed the information contained in this form, give my approval for my child to play football or cheerlead during the current Washtenaw Junior Football season. I assume all risks and hazards incidental to such participation including transportation to and from activities: and do waive, release, absolve, indemnify and agree to hold harmless the organizers, sponsors, supervisors, coaches, participants and persons for any activities associated with playing or practicing football or cheerleading, and for any claim arising out of injury indicating that my child is physically fit to play football or to cheerlead. I understand that all registration fees for furnished before my child may participate, practice or receive Washtenaw Junior Football equipment. Also, I understand that all team assignments will be made at the discretion of the Board of Washtenaw Junior Football and according to League rules.

Parent/ Guardian Signature

Printed name

Date



Washtenaw Junior Football, Inc. Parent/Guardian Conduct and Family Volunteerism commitment

I (We) as a WJF participant parent or guardian make the following promises:

- To be a good example, win or lose!
- To exhibit a consistently positive attitude toward players, coaches, officials, and spectators.
- To encourage each team member - an encouraging remark can work wonders.
- **To volunteer 1 event (1 full game) for each of my (our) participating children in support of WJF functions.**
Note: these functions include (but are not limited to), concessions and spirit wear. (Please visit our website www.washtenawjrfootball.org for detailed information on the new volunteer service time or pick up a detailed flyer at registration)
- In the event I do not complete the volunteer service time required (1 event per athlete) I relinquish my \$40 deposit.
- To refrain from "sideline coaching" my (our) player, cheerleader. If I (we) are not sure what constitutes "sideline coaching", and opposed to "encouraging" I (we) promise to ask our child's coach.
- To refrain from yelling at the referee or the coaches - everyone is a volunteer.
- To respect the opponents - after all, without them, my child would have no one to compete with.
- To make no comments to opposing players, coaches, spectators, or to referees unless my comments express genuine friendship and respect, or unless they constitute a direct response to questions by game, league or tournament officials. In other words, if I can't say anything nice, I won't say anything at all!
- To remain even-tempered and display no ill-tempered behavior. I acknowledge that foul language has no place on the football field and its surroundings and therefore will refrain from using foul language at games, practices and other WJF events.
- To refrain from smoking or alcohol consumption during football games or practices. Note: WJF coaches may point out the disadvantages of smoking, drinking and drug abuse, especially as it pertains to athletic performance. We encourage parents to do the same!
- To support my (our) football player or cheerleader to be at practices and games on time and ready to play.
- To be sure that my (our) football player or cheerleader has the proper clothing and equipment every time he or she is on the football field and its surroundings.
- To bring this agreement to the attention of my spouse if he (she) is not present at registration day signing.
- To remove myself (ourselves) without confrontation from a WJF event, for violation of this agreement, if asked to do so by officials of either WJF or the Downriver Junior Football League.
- To actively assist WJF officials in the enforcement of this conduct agreement by monitoring my (our) guests for violations of the spirit of this agreement.

Parent/ Guardian Signature

Parent/ Guardian Signature

Printed name

Printed name

Date

Date