

- CHEERLEADING
 FOOTBALL

PAID IN FULL
 Board Member Initials _____

CLEBURNE FOOTBALL LEAGUE, INC.

REGISTRATION FORM

Participant has sibling playing football? (need to be on same team)

Name of participant:		Date of birth:	
Address:		Contact Phone #:	Does this number receive text? Yes / No
City/ State/ Zip:		Attends Cleburne ISD:	Yes/ No
Grade participant will be entering in fall:		School attending:	
Prior participation in CFL tackle: Yes/ No If yes, list year & Head Coach:			
Preferred head coach:		Would participant like to be placed in the draft? Yes/ NO	
Name of Parent(s)/ Guardian(s):			
Alternate phone numbers:			
Email Address:			
In case of emergency notify:		Notification Phone:	
Primary Physician:		Insurance provider:	
List all allergies or medical conditions:			
<p>I (parent/ guardian) understand that the CFL is an all volunteer organization and as the parent/ guardian of the above named participant do hereby agree to assist in the operation of the CFL when requested as outlined below:</p> <ol style="list-style-type: none"> 1) I am responsible for the transportation of the participant to and from practices and games. 2) I will work in the concession stand (normally one shift of about two hours for each participant in each sport.) 3) If asked, I will help with the clean-up and maintenance of the facility. 4) I understand that CFL makes no guarantee of participant team placement. Teams are not set until registration and draft process is complete. All participant team placement is final once team selection is complete there are no changes or refunds allowed. 5) I agree to be responsible for all CFL uniforms and equipment issued to the participant. I further agree to return all items issued at the end of the season, date to be announced, or upon request by the coach or board of directors of the CFL. FAILURE to do so will result in the parent or guardian having to reimburse the CFL full replacement price for any lost items. <p>REFUSAL TO COOPERATE COULD RESULT IN REVOKED MEMBERSHIP, MONETARY FINES OR PENALTY. I HAVE READ THE AGREEMENT ABOVE AS WELL AS THE AMATUER WAIVER AND RELEASE OF LIABILITY AGREEMENT ON THE REVERSE HEREOF AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT AND SIGN IT VOLUNTARILY.</p>			
Parent/ Guardian Signature: _____		Date: _____	
CFL Board Member Signature: _____		Date: _____	
Person Fitting Equipment Initials:		Information below for league use only	
FOOTBALL EQUIPMENT:	Player Head Circumference:	Helmet Size: Youth- S M L XL Adult-S M L XL	
Player Shoulder Width:	Shoulder Pad Size:	Game Pants Size: Youth- S M L XL XXL Adult- S M L XL XXL	
Game Jersey Size: Youth- S M L XL XXL Adult- S M L XL XXL		Uniform Number (Choose up to three):	
CHEER EQUIPMENT:	Skirt: Youth-	Sweater Size: Youth-	Undershirt: Youth- Bloomers:
Shoes:	Socks:	Megaphone:	Pom Poms:

CLEBURNE FOOTBALL LEAGUE, INC.
P.O. BOX 614
CLEBURNE, TX 76033-0614

AMATEUR ATHLETIC MINOR WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate, in any way in the Cleburne Football League, Incorporated, hereinafter referred to as the CFL, as an entity engaged in youth football and cheer leading programs and related events and activities, the undersigned:

Agrees that the parent(s), and I or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition and refuse to participate.

ACKNOWLEDGE AND FULLY UNDERSTANDS that each participant will be engaging in ACTIVITIES THAT INVOLVE RISK OF SERIOUS INJURY, INCLUDING PERMANENT DISABILITY AND DEATH, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the action, inaction or negligence of others, the rules of play or the condition of the premises, or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.

ASSUMES ALL THE FOREGOING RISK AND ACCEPTS PERSONAL RESPONSIBILITY FOR THE DAMAGES following such injury, permanent disability or death. Furthermore the signed on the reverse hereof certifies that the minor listed as the participant is physically and mentally capable of participation in activities in the Cleburne Football League, Inc. programs.

RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE THE CLEBURNE FOOTBALL LEAGUE, INC. its affiliate clubs, their respective administrators, directors, officers, agents, coaches and other volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and owners of the premises used to conduct events such as games and practices, all hereinafter referred to as "releases", from any and all liability to each of the signed on the reverse hereof, his or her heirs and next of kin for any and ALL CLAIM, DEMANDS, LOSSES OR DAMAGES ON ACCOUNT OF INJURY, INCLUDING DEATH OR DAMAGE TO PROPERTY, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASE OR OTHERWISE.

The signed on the reverse hereof further agrees that all equipment issued to the listed participant is loaned to the participant for the duration of the CFL season for in the calendar year listed on the registration. The signed on the reverse hereof understands that all equipment issued to the participant will be returned upon request of the coach or board member of the CFL or will be assessed a monetary penalty of expenses not to exceed the price of the replacement of the item(s) not returned or missing before December 31ST of the year listed on the registration. **NO EQUIPMENT WILL BE ISSUED TO A PARTICIPANT UNTIL ALL REGISTRATION FEES CURRENT AND PAST ARE PAID IN FULL. NO EQUIPMENT WILL BE ISSUED UNTIL ALL EQUIPMENT FROM PREVIOUS SEASON HAS BEEN RETURNED OR REPORT'ED LOST AND COMPENSATED FOR.**

This further serves as certification that the parent or guardian listed and signed on the reverse hereof for the minor participant listed on the reverse hereof on a CFL football or cheer team, hereby grant permission to the adult coach, assistant coaches or CFL board member to obtain medical care from any licensed physician, hospital, or medical clinic for the participant named on the reverse hereof at such time as either parent or legal guardian cannot be contacted in person or by telephone at either of the numbers listed on the reverse hereof. This authorization shall include all league activities, including but not limited to the period of time required to travel to and from those activities; **AND WE DO HEREBY WAIVE, RELEASE, ABSOLVE, INDEMNIFY AND AGREE TO HOLD HARMLESS THE CLEBURNE FOOTBALL LEAGUE, INCORPORATED; BRAZOS VALLEY FOOTBALL ASSOCIATION;** the organizers, supervisors, participants for any claim arising out of an injury to the player.

THE PARENT(S) AND OR GUARDIAN(S) ON THE REVERSE HEREOF HAVE READ BOTH THE WAIVER AND RELEASE, UNDERSTANDS THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.