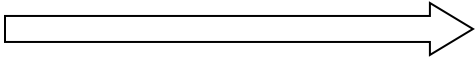


League Age \_\_\_\_\_ as of Aug. 1, 2024, 

**LEAGUE AGES:** **Mighty Mite:** 4, 5, 6  
**Jr. PeeWee:** 7, 8 (9)  
**PeeWee:** 9, 10, 11 (12)  
**Midget:** 11, 12, 13, and (14)

**New:** \_\_\_\_ **Returner:** \_\_\_\_ **Release:** \_\_\_\_ **Not Eligible** \_\_\_\_ (8<sup>th</sup> Graders must play midgets)

Sex: M / F Weight: \_\_\_\_\_ lbs. Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_  
 8/1/24 **NO CHEERLEADERS ENROLLED IN HIGH SCHOOL**

Participant Name:

<b>Last</b>	<b>First</b>	<b>Middle</b>
-------------	--------------	---------------

Home Address:

# & Street	City	State	Zip
---------------	------	-------	-----

Parent/ Legal Guardian Name: \_\_\_\_\_

Parent/Legal Guarding Phone #: \_\_\_\_\_

Parent/Legal Guardian Email: \_\_\_\_\_

Emergency Contact Name & Phone #: \_\_\_\_\_

Health Insurance:

Carrier	Policy #
---------	----------

**1. MEDICAL HISTORY**

Name of Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Current Medications: \_\_\_\_\_

	YES	NO		YES	NO		YES	NO
Allergies: Specify:			Head Injuries within (1) year			History of heart murmur		
Glasses/Contacts			Tetanus Shot			Kidney Disease		
Dental Braces or Bridges			Date:			Diabetes		
Fractures: within (1) year Specify:			Serious injury Specify:			Seizures		
Blood Disease - HIV/Infections? Specify:			Surgery within the past year Specify:			Repeated Bone or Joint Injuries Specify:		

**2. EMERGENCY MEDICAL RELEASE**

I/We the parents or guardians of the above-named applicant give our permission for any emergency treatment necessary, either on the practice field or on the game field. I/We authorize any hospital and/or physician to perform emergency treatment for any injury resulting from any scheduled Monterey Bay Youth Football League function, including the supervised travel to and from said functions: (Parent/Guardian Signature) \_\_\_\_\_

**3. PARENTAL CONSENT**

I/We the parents/guardians of the above-named applicant give our permission for the applicant to compete as a player/cheerleader in the Monterey Bay Youth Football League.

I/We, the undersigned, and all family and friends agree to abide by the Monterey Bay Youth Football League Code of Conduct/participation agreement at all Monterey Bay Youth Football League games and events.

I/We accept responsibility for the accuracy of all information supplied on this application.

I/We understand that any false information can result in the immediate dismissal of the player and/or cheerleader named above.

I/We the parents or guardian of the above-named applicant to Monterey Bay Youth Football League assume all risks and hazards incidental to such participation, including transportation to and from activities.

I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless the Monterey Bay Youth Football League, The Organization, Sponsors, Supervisors, Coaches, participants, and any persons transporting the applicant, except to the extent and in the amount covered by accident or liability insurance.

I/We are to be financially responsible for the Monterey Bay Youth Football League equipment issued to the applicant other than normal wear and breakage during games and practice.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**By signing ABOVE, we (parent/guardian) assert that the address and all other information we have listed is true, and if falsified we understand that disciplinary action will take place with the team as well as termination of my child from the team.**

## Monterey Bay Youth Football League Player Identification Card

CHEER NAME: _____
<div style="display: flex; justify-content: space-around; width: 100%;"> <span>____ / ____ / ____</span> </div>
<div style="display: flex; justify-content: space-between;"> <span>BIRTHDATE</span> <span>LEAGUE AGE</span> </div>

TEAM & DIVISION CHEER:

<b>MBYFL CERTIFICATION</b>
----------------------------

MBYFL SIGNATURE _____	DATE _____
-----------------------	------------

HEAD ADVISOR SIGNATURE _____	DATE _____
------------------------------	------------

TEAM PRESIDENT SIGNATURE _____	DATE _____
--------------------------------	------------

LEVEL OF PLAY	<b>DIVISION AGES</b> Mighty Mites 4,5, 6			
<b>JPW</b>	<b>JUNIOR PEE WEE</b>			
	7	8	9	
<b>PW</b>	<b>PEE WEE</b>			
	9	10	11	12
<b>MID</b>	<b>MIDGET</b>			
	11	12	13	14

Photo will be taken by  
Team Official of Player in  
Game Jersey and attached  
here