

Mount Baker Youth Athletic Association– Football

Find us at www.MBYAA.com and



2015 Registration-Due 5/22/15

Player Information

Name-Last:		First:
DOB:	Grade (Fall of 2015):	School:
Approx. Height:		Weight:

Parent/ Guardian Information

Name:		e-mail:	
Address:		City:	Zip:
Home Phone:	Cell:	Work Phone:	Other:

Insurance/ Physician/ Emergency Contact

Insurance Provider:		Policy #:	
Physician Name:			Phone:
Emergency Contact Name:			Relation:
Home Phone:	Work:	Cell:	
Address:		City:	Zip:

Teams

<u>Divisions</u> Practice start date	Check One	Shirt Size	Grade Level	Fee* Due 5/22/15
<u>Junior Flag</u> TBD			1 st & 2 nd Grade	\$95
<u>Senior Flag</u> TBD			3 rd & 4 th Grade	\$95
<u>Junior Tackle</u> August 1, 2015			4 th & 5 th Grade	\$140
<u>Senior Tackle</u> August 1, 2015			5 th & 6 th Grade	\$140

If you have any questions about registration

Please contact Susan Beason by e-mail at mbyaafotball@gmail.com or call 739-3922

Turn Over and Sign Authorization and Release Form

* Fee includes 1-year membership to Boys & Girls Clubs of Whatcom County (6/1/15 to 5/31/16)
Go to www.whatcomclubs.org for more information.

**Registrations received after May 22, 2015 will be filled only if space is available up until:
Aug 7, 2015 for Tackle and Sept 4, 2015 for Flag**

Office Use Only:	Date Recv'd _____ by _____	___Paid: Check# _____ Cash _____
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There is a LATE FEE of \$35 if received after the May 22nd deadline!

- ✓ If your child has not played tackle football for MBYAA, you will need to provide a copy of the player's **birth certificate**. (Not required for Flag Football)
- ✓ Due to limitations in available equipment and uniforms, Tackle rosters are limited to the first 50-60 players who register. Older ages will have priority over younger ages. For example, a 5th grader will have priority over a 4th grader, regardless of when registration is received prior to the deadline.
- ✓ Make checks out to "**Mount Baker Youth Athletic Association**"
- ✓ Limited Scholarships and payment schedules can be arranged. Contact Kevin Beason at 739-3665
- ✓ Send completed form and birth certificate with fees **by 5/22/2015** to: **MBYAA - Football**
c/o Susan Beason
2960 Sundown View Lane
Bellingham, WA 98226



Authorization and Release:

I/We the Parent or Legal Guardian of the above named minor, hereby give my approval for his/her participation in the MBYAA flag and tackle football program. I understand that football is a contact sport that minor injuries are common, and more serious injuries can occur. I further believe that the child being registered above is in, at least reasonable physical condition, and can endure the rigors of organized football conditioning, practice, and games. I hereby give permission for my child to be given cardiopulmonary resuscitation (CPR) and first aid treatment by a qualified volunteer member of MBYAA. In the event that I cannot be contacted, I also give permission for my child to be transported by ambulance or aid car to an emergency center for treatment. I further consent to the disclosure of health information and to medical, surgical, and hospital care treatment and procedures (including, but not limited to, administration of necessary anesthetics, tests, x-ray examination, transfusions, injections, drugs) to be performed for my child by a licensed physician or hospital selected by the MBYAA director when deemed necessary or advisable by the physician to safeguard my child's health. I also agree to furnish a photo copy of a certified birth certificate for the player.

Parent/Guardian Initial _____

Release from Liability:

Recognizing that MBYAA will do its best to ensure a safe experience, I understand that accidents may occur from both my child's participation in youth sport activities and from transportation to and from events. I agree to assume these risks. By signing below, I release MBYAA, its directors, board members, volunteers, independent contractors and agents from all liability based on damage, loss or injury whether it is the result of ordinary negligence or otherwise, caused to my child or to me, from participating in the youth sports program.

Parent/Guardian Initial _____

Insurance:

It is the responsibility of every individual, their parent or legal guardian, to provide for their own accident and health coverage while participating in all MBYAA activities.

Parent/Guardian Initial _____

Photo & Video Release:

I give my permission for MBYAA to use any photographs or video of my child for future promotional purposes including, but not limited to, MBYAA.com or the MBYAA Facebook page.

Parent/Guardian Initial _____

Signature of Parent or Legal Guardian _____ Date: _____

The district does not sponsor or endorse the event/information and the district assumes no responsibility for it. In consideration of the privilege to distribute materials, the Mount Baker School District will be held harmless from any cause of action filed in any court or administrative tribunal arising out of the distribution of these materials, including costs, attorney's fees and judgments or awards.