

# FOOTBALL



# CHEERLEADING

## NEW AGE DIVISIONS CHEERLEADING SQUADS

### 6 – 8 YEAR OLDS

(Must be 6 on or before July 31, 2010)

### 9 – 10 YEAR OLDS

(Must be 9 on or before July 31, 2010)

### 11 – 13 YEAR OLDS

Cannot turn 14 before July 31, 2010

\$50.00 Registration Fee with copy of Birth Certificate & completed Registration Form (After July 31<sup>st</sup> the Registration Fee is \$65.00)



### ROOKIES – 7 – 8 YEAR OLDS – 6 TEAMS

EACH of the 6 TEAMS LIMITED to the 1<sup>st</sup> 30 APPLICANTS  
(Must be 7 on or before July 31, 2010)

Weight Limit for Rookies is 120lbs.

### JUNIORS – 9 – 10 YEAR OLDS – 6 TEAMS

EACH of the 6 TEAMS LIMITED to the 1<sup>st</sup> 30 APPLICANTS  
(Must be 9 on or before July 31, 2010)

Weight Limit for Juniors is 140lbs.

### SENIORS – 11 – 13 YEAR OLDS – 6 TEAMS

EACH of the 6 TEAMS LIMITED to the 1<sup>st</sup> 30 APPLICANTS  
(Must be 11 on or before July 31, 2010)

Weight Limit for Seniors is 160lbs.

Older / Lighter 13 year olds max weight is 115lbs. & cannot turn 14 during the season.

\$50.00 Registration Fee with copy of Birth Certificate & completed Registration Form (After July 31<sup>st</sup> the Registration Fee is \$65.00)



**DEADLINE for REGISTRATION is JULY 31, 2010**

**EACH OF THE 18 TEAMS LIMITED TO THE FIRST 30 PLAYERS REGISTERED**



Mail Entry Fee & Registration for **Cheerleading** to:



Brunswick County Parks & Recreation  
C/O Ruthie McHugh  
P.O. Box 249  
Bolivia, North Carolina 28422  
Phone: (910) 253-2670  
Fax: (910) 253-2684  
Email: [rmchugh@brunscos.net](mailto:rmchugh@brunscos.net)



Mail Entry Fee & Registration for **Football** to:

Brunswick County Parks & Recreation  
C/O Brian Moore  
P.O. Box 249  
Bolivia, North Carolina 28422  
Phone: (910) 253-2670  
Fax: (910) 253-2684  
Email: [bmoore@brunscos.net](mailto:bmoore@brunscos.net)



**2010 BRUNSWICK COUNTY AMERICAN YOUTH FOOTBALL  
& CHEERLEADING REGISTRATION**

**(FORM MUST BE FILLED OUT COMPLETELY WITH BIRTH CERTIFICATE & FEE PAID TO BE ELIGIBLE)  
PLEASE PRINT NEATLY OR TYPE & FILL OUT COMPLETELY**

**PARTICIPANT:** \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)

**MAILING ADDRESS:** \_\_\_\_\_  
(P.O. BOX or STREET) (CITY) (ZIP)

**PHYSICAL ADDRESS:** \_\_\_\_\_  
(P.O. BOX or STREET) (CITY) (ZIP)

**HOME PHONE:** (910) \_\_\_\_\_ - \_\_\_\_\_ **EMERGENCY:** (910) \_\_\_\_\_ - \_\_\_\_\_

**MOM WORK:** (910) \_\_\_\_\_ - \_\_\_\_\_ **DAD WORK:** (910) \_\_\_\_\_ - \_\_\_\_\_

**MOM CELL:** (910) \_\_\_\_\_ - \_\_\_\_\_ **DAD CELL:** (910) \_\_\_\_\_ - \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ @ \_\_\_\_\_

**BIRTHDATE:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **AGE AS OF JULY 31<sup>ST</sup>:** \_\_\_\_\_

**HEIGHT:** \_\_\_\_ ' \_\_\_\_ " **WEIGHT:** \_\_\_\_\_ **LBS.**

**PREVIOUS TEAM (IF ANY)** \_\_\_\_\_ **SCHOOL:** \_\_\_\_\_

**CHEER TEAM REGISTERING FOR:** \_\_\_\_\_

**ANY PHYSICAL LIMITATIONS:** \_\_\_\_\_

**If interested in coaching Football or Cheerleading please indicate?**  YES  NO

**PARENTAL CONSENT: PLEASE READ & SIGN: APPLICATION MUST BE SIGNED BY AT LEAST ONE PARENT/GUARDIAN FOR PARTICIPANT TO BE ELIGIBLE. BY SIGNING THIS REGISTRATION, YOU ARE STATING THAT YOU UNDERSTAND AND AGREE TO FOLLOW THE TERMS AND CONDITIONS BELOW.**

I/WE, the Parents/Guardians of the above named candidate for a position on any of the BFL Youth Football/Cheer teams, hereby give MY/OUR approval to his/her participation in any and all BFL Youth Football/Cheer activities during the current season. I/WE assume all risks and hazards incidental to such participation including transportation to and from such activities, and I/WE do hereby waive release, absolve, indemnity and agree to hold harmless the Brunswick County Parks & Recreation, BFL Youth Football League and its Associations, the sponsors, supervisors, participants, volunteers and persons transporting MY/OUR child to and from activities for any claim arising out of illness, injury, accidental death or damage to personal property sustained in the above activity to MY/OUR child. I/WE and participant agree to abide by the BFL Rules of Conduct.

YOUR CHILD **MUST** PLAY FOR THE TEAM IN THE DISTRICT IN WHICH YOUR PHYSICAL ADDRESS FALLS. IF THERE IS NOT A TEAM FROM THAT DISTRICT, HE/SHE WILL BE ABLE TO PLAY FOR THE TEAM IN THE NEXT CLOSEST DISTRICT. **RETURNING PLAYERS ARE ASSIGNED TO THE TEAM PLAYED FOR UNLESS THEY REGISTER AFTER DEADLINE AND THEN THEY MAY BE PUT INTO THE DRAFT OR ON A WAITING LIST.**

AS A PARENT OR GUARDIAN, I ASSUME ALL RESPONSIBILITY FOR ANY UNIFORM / EQUIPMENT THE ABOVE PARTICIPANT RECEIVES FOR THIS PROGRAM. **NO ALTERATIONS TO ANY UNIFORM OR EQUIPMENT ARE ALLOWED. UNIFORM / EQUIPMENT MUST BE RETURNED BY THE LAST GAME OR EVENT OF THIS PROGRAM OR I WILL PAY FOR THE UNIFORM / EQUIPMENT.**

**PARENTAL MEDICAL TREATMENT AUTHORIZATION:** In the event of injury to MY/OUR child, I/WE hereby grant authority to a qualified paramedic/ physician to render such medical treatment as said paramedic/physician deems necessary under the circumstances. **(BRUNSWICK COUNTY E.M.S. IS PRESENT FOR GAMES)**

**PICTURE CONSENT FOR FILM / WEBSITE / ADVERTISEMENTS:** I/WE give permission to have my child's picture on the BCP&R/league web site, program advertisements, video for purposes of televising games and any other medium used strictly to promote the BFL.

**PLEASE MAIL COMPLETED FORM TO:** BCP&R ~ ATTN: BRIAN MOORE ~ P.O. BOX 249 ~ BOLIVIA, NC 28422  
**FAX:** (910) 253-2684 (REGISTRATIONS MUST BE COMPLETED & SIGNED/FEE PAID/& A COPY OF PARTICIPANTS BIRTH CERTIFICATE RECEIVED BEFORE ANY PARTICIPATION CAN BEGIN.) **I/WE have read the above and agree and understand the policies set forth above**

**X** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **X** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
**MOM/GUARDIAN / DATE DAD / GUARDIAN/DATE**