



Registration Form

ATHLETES: Fill out this form, attach cash or check for lunch and give to your Coach ASAP)

*Coaches: Bring all forms together alphabetically to check in on June 16
all others mail in registration form to NYFO Office

CIRCLE ALL THAT APPLY:

7-on-7 Tournament

Team Lineman Challenge

Individual Lineman Challenge

Free Youth Football Camp

Player: _____ **Team (if applicable):** _____

School: _____ **Grade:** _____

Home Phone: _____ **Player's Cell:** _____

Address: _____

Player's Email: _____

Pediatrician & Phone: _____

Dentist & Phone: _____

Insurance & Policy #: _____

Insured's Name: _____

Does NYFO have permission to have your child seen by a doctor / dentist if needed? _____

Parent's Name printed

Parent's Signature

Parent's Cell Number: _____

Parent's Email: _____

Additional Contact Name: _____ **Cell:** _____

I have attached \$7 cash or check (To: NYFO) for Lunch & Drink? Circle: YES NO

Twitter: @7on7Champ
www.7on7nationalchampionship.com

2018 Player Release Form: By signing this release, I grant permission for my minor child ("my Son" or "the Child") to participate in the ["National Youth Football Organization" youth football event] (the "Event") detailed on page 1. I agree to comply with all rules and regulations of the Event and to ensure that my Son complies with all rules and regulations of National Youth Football Organization. In granting this permission and signing this release, I hereby release, discharge, and hold harmless National Youth Football Organization, Generous Community, Inc, Ting Park ("Football Event, Tournament or Camp"), its affiliates and sponsors, the owners of the facilities where the camp will be held, and all of their respective agents and employees from and against all causes, liabilities, damages, claims or demands whatsoever arising out of or resulting from my son's/daughter's attendance at or participation in the Event and/or my attendance at or participation in the Event.

In signing this release, I understand that participating in a football event such as the Event can be a dangerous activity and involves the risk of injury, including but not limited to, brain damage, cardiac arrest, serious injury to internal organs and to bones, joints, ligaments, muscles, tendons and other serious injury or impairment to other aspects of the child's general health and well-being as well as the potentially high cost of medical care and the potential for future impairment to my son/daughter. I agree to comply with, and to ensure that my son /daughter complies with, all recommendations of administrators, coaches, athletic trainers, and doctors concerning injury prevention and emergency care. I consent to any and all health care providers designated by "National Youth Football Organization" football events, tournaments or camps to provide my son any necessary medical care as a result of any injury or illness suffered during the Event, and I acknowledge that any such medical care provided during the Event is furnished on a Good Samaritan basis, and National Youth Football Organization assumes no obligations or liability with regard to such medical care.

I further acknowledge that some portions or the entire Event will be recorded on video and/or in still photographs. I consent to such video recording and/or photography, and acknowledge that such video recordings and/or photographs may contain my son's/daughter's name, likeness, image, voice, interview(s) and performance. National Youth Football Organization, its affiliates and sponsors may use and authorize others to use all or parts of the video recording and/or photographs for any purpose, including but not limited to promotional materials regarding this Event or future events and broadcasting of such video recording through any means including web-casting and/or distributing DVDs. National Youth Football Organization and its successors and assigns, shall own all rights, title and interests, including the copyright, in and to the video recordings and/or the still photographs, to be used or not used as National Youth Football Organization shall determine in its sole discretion. I understand and acknowledge that neither I nor my Son or daughter are entitled to, nor will we receive, any compensation as a result of the taking of such photographs, the making of such video recording, or of the subsequent use of such photographs and/or video recording.

PLAYER NAME (printed):

PARENT/GUARDIAN NAME (printed):

PARENT/GU. SIGNATURE: _____

Date: _____

***Players, turn your form into your Coach ASAP. Coach, please send all forms together.**

Please submit both pages of this Registration Form to NYFO one of the two methods below:

Scan & Email: info@playnyfo.com

Mail: National Youth Football Organization * 7128 Falls Glen Court, Suite 200 * Raleigh, NC 27614