



## Del Norte Youth Football

P. O. Box 1277 Crescent City, Ca. 95531  
 (707) 954-4868  
[www.dnyf.org](http://www.dnyf.org)

**A**  
**AA**  
**AAA**

### REGISTRATION FORM

**CHEERLEADING:**  
**MASCOTS: 5, 6, 7 YEAR OLDS**  
**"A"-8, 9, 10 YEAR OLDS**  
**"AA"-10, 11, 12 YEAR OLDS**  
**"AAA"-12, 13, 14 YEAR OLDS**

**FOOTBALL:**  
**"A"-8, 9, 10\* YEAR OLDS**  
**"AA"-10\*, 11, 12\* YEAR OLDS**  
**"AAA"-12\*, 13, 14 YEAR OLDS**  
**NO WEIGHT RESTRICTIONS IN ANY DIVISION**

### PARTICIPANT INFORMATION – PRINT LEGIBLY

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Street Address \_\_\_\_\_ Best Contact Phone#: \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Fall 2011 Grade: \_\_\_\_\_ Fall 2011 School \_\_\_\_\_  
 Age as of 11/30/2011 \_\_\_\_\_ Returning player? Y/N Total years played with DNYF \_\_\_\_\_ with SRYF? \_\_\_\_\_  
 Previous Team/Division: \_\_\_\_\_ Sibling(s) \_\_\_\_\_  
 Association Waiver Request: NO / YES (Proof of residency needs to be attached as outlined by Association)

**\*PARENT/GUARDIAN(S) NEED TO IDENTIFY WHICH DIVISION HE/SHE WANTS HIS/HER CHILD(REN) PLACED ON FOR THE FOLLOWING AGE GROUPS FOR FOOTBALL ONLY:**

Circle one  
 10 YEAR OLDS: A      AA      12 YEAR OLDS : AA      AAA

### Parent/Guardian Emergency Contact Information (please be complete as possible)

Parent / Guardian 1		Parent / Guardian 2	
Full Name		Full Name	
Relationship to Player		Relationship to Player	
Work Phone		Work Phone	
Cell Phone		Cell Phone	
Email Address		Email Address	

**IMPORTANT NOTE: No participation without a completed SRYF Physical Form/Waiver. NO EXCEPTIONS!!!!**

### No Refunds. Equipment will be issued when full registration payment is received. Players will not be allowed to participate in DNYF program if payment is not paid in full. Fees include rental of game uniform, football or cheerleading equipment. Uniforms and equipment are the property of DNYF and must be returned by the end of the season. I agree to pay the cost of any lost equipment issued to my child or me by DNYF.

I, agree to adhere to the code of conduct as outlined in the current SRYF Code of Conduct Form provided by SRYF and affiliated associations. I understand that any failure to adhere to outlined conduct could result in my ability to participate in any or all SRYF/affiliated association activities including practices, regularly scheduled games, post-season, cheer competition, and championship games. I also understand that any failure on my part to adhere to SRYF Code of Conduct could also result varying sanctions from removal of a game/practice site, to the termination of my child/children in any SRYF sponsored activity.

I, also understand that if my child has the ability to participate between dual divisions specific to football participants, only, due to his/her current season age that I am making a decision to place my child/children on the appropriate division in accordance in the best interests of my child/children. Any and all schedules for SRYF games during the season and post season are always subject to change, date, time & location with notification to the association President.

Signature of Parent / Guardian \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Parent / Guardian \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

DNYF Board Use ONLY	Check No./Cash	Amount Paid/Date Received	Volunteer buy-out <b>Y / N</b>
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