



# LYNNWOOD ROYALS JR FOOTBALL FOOTBALL & CHEER REGISTRATION



## PLAYER INFORMATION

FULL NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_ AGE \_\_\_\_\_  
 GRADE ENTERING \_\_\_\_\_ FALL '18 SCHOOL \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
 RETURNING PLAYER? \_\_\_\_\_ HEIGHT \_\_\_\_ FT \_\_\_\_ IN WEIGHT \_\_\_\_\_ LBS  
 TEAM  PeeWee K-2nd grade (5-7yrs)  Bantams 7th grade (12yrs)  
 89ers 3-4th grade (8-9yrs)  
 Juniors 5-6th grade (10-11yrs)  Cheer Team (7-14yrs)

## PARENT / GUARDIAN INFORMATION

CONTACT \_\_\_\_\_ RELATION \_\_\_\_\_  
 PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_  
 ADD'L CONTACT \_\_\_\_\_ PHONE # \_\_\_\_\_

## MEDICAL & EMERGENCY INFORMATION

EMERGENCY CONTACT PERSON \_\_\_\_\_ PHONE \_\_\_\_\_  
 PREFERRED MEDICAL FACILITY \_\_\_\_\_ PCP NAME \_\_\_\_\_  
 PCP CLINIC # \_\_\_\_\_ MEDICATIONS \_\_\_\_\_  
 ALLERGIES AND/OR MEDICAL CONDITIONS \_\_\_\_\_

## CONSENTS & WAIVERS

### MEDICAL AUTHORIZATION - Grant of Consent

INITIAL \_\_\_\_\_ I hereby certify that my child is in good health and may participate in all activities. In the event of an emergency, I give permission for my child to be given emergency treatment at any accessible hospital.

### LIABILITY WAIVER

INITIAL \_\_\_\_\_ As the parent and/or legal guardian of the above name minor, I grant permission to participate in all activities of the sports program. I assume all risk and hazards incidental to such participation, including transportation to and from such activities, and do hereby release and waive all claims against Lynnwood Youth Sports Board Members, Staff, Coaches, Volunteers, Sponsors, and all School Districts we may participate in.

### HB 1824 COMPLIANCE STATEMENT

INITIAL \_\_\_\_\_ I have been provided with information on concussions in youth sports. If the player is suspected of a head injury or concussion, the player will be removed from play. The player will be kept from play until given permission to return to play by a health care provider. [www.cdc.gov/ConcussioninyouthSports](http://www.cdc.gov/ConcussioninyouthSports)

## 2018 FOOTBALL & CHEER FEES

*In order to receive gear at the time of distribution, the Registration fee must be paid in full. No exceptions.*

\$	150	1st year Pee-Wee*	* INCLUDES a Mandatory Fundraiser of \$50 . You'll have the opportunity to recoup the \$50 during the fundraising event. More details to be provided once the season begins. Restrictions Apply.
\$	250	PeeWee - 89ers*	
\$	280	Juniors - Bantams*	
\$	150	Cheer Team ***	*** Registration fee only. Does not include uniform costs

**NO REFUND POLICY** - I understand there is a NO refund policy once the season has begun.

INITIAL \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Mailing Address: Lynnwood Youth Sports Association (L.Y.S.A.)

PMB 644 - 4320 196th ST SW #B - Lynnwood, WA 98036-6754

"The Edmonds School District does not sponsor or endorse the activity and/or information contained in this material"

