



**NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM**

**REGISTRATION FORM**

Age Group (please x) :

<input type="checkbox"/> Bantam 14 & under	<input type="checkbox"/> Intro 15-17y	<input type="checkbox"/> PeeWee 11-12	<input type="checkbox"/>
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Actual Payment (please x):

<input type="checkbox"/> Full Season Fee \$423 (cash \$410)	<input type="checkbox"/> Registration Fee \$34 (cash \$130)
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**PLEASE FILL OUT ALL FIELD, SIGN AND BRING PRINTED REGISTRATION TO FIRST PRACTICE!**

Players First Name: \_\_\_\_\_ Players Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Actual Age: \_\_\_\_\_

Player Address/Street: \_\_\_\_\_ Apt./additional Info: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Players Email: \_\_\_\_\_ Players Phone #: \_\_\_\_\_

School Name: \_\_\_\_\_ Actual average %/GPA: : \_\_\_\_\_

Parent/Guardian First Name: \_\_\_\_\_ Parent/Guardian Last Name: \_\_\_\_\_

Parent/Guardian Address/Street: \_\_\_\_\_ Parent/Guardian Apt./additional Info: \_\_\_\_\_

Parent/Guardian City: \_\_\_\_\_ Parent/Guardian Zip Code: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_ Parent/Guardian Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Emergency Contact Phone Number \_\_\_\_\_ Emergency Contact Email: \_\_\_\_\_

**EQUIPMENT Deposit and LOAN AGREEMENT** . I understand, I have to make a Deposit of \$150 to get Equipment for my player. I agree to return all equipment loaned to my child by the NYC LIONS. A card on file is required in case any equipment is not returned. The card will be saved when you make your payment below. If equipment is not returned at the end of the season the card on file will be charged \$850 to replace the equipment. I agree to have my card charged for any equipment not returned to the NYC LIONS.

Parent/Guardian Name First & Last / Print: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date of Signature: \_\_\_\_\_



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#### **Payment Requirement**

A minimum payment of \$130 (Registration fee +\$10 Handling Fee.) + Paypal/CashApp Fee. ) is required to join the practice and complete registration.

#### **Equipment Release Requirement**

- Deposit of \$ 150 required to get Equipment; returned if in good condition latest 3 days after we got the Equipment back
- We must have received a minimum Season Fee payment of \$250 on day of Equipment hand-out

#### **Non payment Player Exclusion**

Players who didn't have paid the entire season fee by Oct. 20th will be excluded after one week. We cannot maintain our program if payments are not made.

#### **Payment due dates**

Please go online to <https://nycayfl.com/lions-reg-page> and download our detailed list.

#### **Installment/Payment Plan Agreement**

1. The payment plan is three or five payments charged to the card on file or via CashApp every 6th of a month, or via Check, Cash on practice field till full amount is paid.
2. The first payment is due at the completion of the registration form. The following payments will be due at their respective dates.
3. I agree to have my card or CashApp charged on the 6th until the outstanding balance is paid in full.

Parent/Guardian Name First & Last / Print: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_



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#### Refund/Cancellation Policy

Registration Fee can NOT be refunded as we incur several cost to register players. If full Season Fee is paid, we refund max. 45% of your payment, if you cancel within two weeks of registration but only if it's before the first game or scrimmage is played. There are no refunds after the first game or scrimmage is played. Refunds will only be processed once we receive all equipment that was loaned out and is in proper condition. There will be no refunds if a player is removed from the team for violating the code of conduct, team rules, and/or league rules, or missing season fee payments.

Parent/Guardian Name First & Last / Print: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

#### SCHOLASTIC VERIFICATION

I hereby stipulate that either my child (Players name here/Print)

\_\_\_\_\_ is scholastically fit and will adhere to all rules and regulations therein. Furthermore, I hereby authorize my child's school to release school grades, report card results, and any and all other pertinent scholastic information to the NYC Lions Youth Football Organization. in order to comply with Organizational requirements.

Parent/Guardian Name First & Last / Print: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

#### Waiver and Release of Liability, Medical Treatment Authorization and Consent

ASSOCIATION NAME: NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and NEW YORK CITY YOUTH FOOTBALL LEAGUE

IN CONSIDERATION OF the risk of injury that exists while participation in Youth Tackle Football (hereinafter the "Activity"): and IN CONSIDERATION OF participation in Activity I, (Parent/Guardian / PRINT NAME) \_\_\_\_\_ confirm

(Players Name /PRINT NAME) \_\_\_\_\_, my child/ward, is allowed to participate in ANY WAY in NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and NEW YORK CITY YOUTH FOOTBALL LEAGUE athletic sports program, related events and activities, related transportation and NYCYP League events.

The risks of injury and illness (ex: communicable diseases such as MRSA, influenza, and COVID-19) to my child from the activities involved in these programs are significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and,



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FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation;

\_\_\_\_\_ (Initial here)

I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant concern in my child, readiness or, hazard during my presence or participation, and/or in the program itself, I will remove my child from participation and bring such to the attention of the nearest official immediately;

\_\_\_\_\_ (Initial here)

I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and NEW YORK CITY YOUTH FOOTBALL LEAGUE; its directors, officers, officials, referees, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct of any event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

\_\_\_\_\_ (Initial here)

In case of a medical emergency, I (Parent/Guardian / PRINT NAME)

\_\_\_\_\_ born (DOB) \_\_\_\_\_ hereby give permission to NEW YORK

CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and Volunteers to order treatment for my child,

(Name of Child/ PRINT NAME) \_\_\_\_\_,

DOB \_\_\_\_\_ including any necessary medical treatment and x-rays. I also hereby give permission to NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and Volunteers to disclose the information contained on the Emergency Medical Card to medical personnel. I understand that an attempt will be made to reach me by phone when a diagnosis is completed. I agree to pay all medical, hospital, or other expenses which my child or I may incur as a result of such treatment.

NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and NEW YORK CITY YOUTH FOOTBALL LEAGUE does not disclose your nonpublic personal medical and financial information, except as required or permitted by law. NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and NEW YORK CITY YOUTH FOOTBALL LEAGUE also does not provide any medical or other insurance protection.

\_\_\_\_\_ (Initial here)

I, the parent/guardian, assert that I have explained to my child/ward: the risks of the activity, his/her responsibilities for adhering to the rules and regulations, and that my child/ward understands this agreement.

\_\_\_\_\_ (Initial here)



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I, FOR MYSELF, MY SPOUSE, AND CHILD/WARD, HEREBY ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND MEDICAL TREATMENT AGREEMENT AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE OF ALL ITS AFFILIATES, MANAGERS, MEMBER, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVE, PREDECESSORS, SUCCESSORS AND ASSIGNS, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION AND I AGREE VOLUNTARILY GIVE UP OR WAIVE ANY RIGHTS THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION NEW YORK CITY NYC LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and NEW YORK CITY YOUTH FOOTBALL LEAGUE FOR PERSONAL INJURY OR PROPERTY DAMAGE.

I FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of Child/Ward (Print Name): \_\_\_\_\_

Name of Parent/Guardian (Print Name): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**UNDERSTANDING OR RISK**

I understand the seriousness of the risks involved in participating in NEW YORK CITY LIONS YOUTH FOOTBALL LEAGUE RUN TO DAYLIGHT EDUCATION PROGRAM and NEW YORK CITY YOUTH FOOTBALL LEAGUE sports program, related events and activities, related transportation and my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

Name of Child/Ward (Print Name): \_\_\_\_\_

Signature of Child/Ward: \_\_\_\_\_

Date Signed: \_\_\_\_\_



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#### CODE OF CONDUCT AGREEMENT

1. In order to uphold the goals of the NYC Lions Youth Football Organization and ensure that all participants have the benefit of a safe and fun learning environment, all participants including but not limited to players, parents/guardians including other adults and attendees of NYC Lions Youth Football Organization events, including but not limited to practices, competitions, fundraising events, and banquets must behave accordingly in a respectful, courteous and sportsmanlike manner at all times.
2. There will be no consumption or use of alcohol, tobacco or prescription drugs and/or any person who appears intoxicated at a NYC Lions Youth Football Organization event will be removed from the event.
3. Any participant who is flagrantly rude, attempts to intimidate, verbally abuse, heckles, taunts, ridicules, boos, throws objects, uses vulgarity or profane language/gestures directed at an official, coach, volunteer, staff member, participant or other event attendee, will receive a verbal warning and/or be asked to leave the NYC Lions Youth Football Organization event. The NYC Lions Youth Football Organization may also provide a written warning to the individual regarding the misbehavior. If the individual is an adult their children may also be removed from the event. Any individual who commits one of the above stated offenses a second time, will be banned from any and all NYC Lions Youth Football Organization events for a period of one year from the date of the second offense, and if the individual is an adult their children may also be removed from the program(s) for that time period without a refund.
4. Any participant who physically assaults an official, coach, volunteer, staff member, other participant or threatens bodily harm may be banned from any and all NYC Lions Youth Football Organization events for one year from the date of the offense, and if an adult their children may also be removed from any and all NYC Lions Youth Football Organization programs for that same period of time without a refund. After the ban has expired, if the individual commits another offense of the code of conduct, the individual will be permanently banned from any and all NYC Lions Youth Football Organization events and if the individual is an adult their child may also be permanently removed from any and all NYC Lions Youth Football Organization programs without a refund.
5. Participants will follow all organization/team rules along with all league rules and guidelines. Violation of any can result in suspension and/or removal of the participant from the event and/or program without a refund.

Name of Parent/Guardian (Print Name): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_