



Brave Pride Junior Football
12733 Lake City Way NE, #101
Seattle, WA 98125
206-368-5524
www.bravepridejrfootball.com

Registration and Release Form

Participant's Name: _____ Date of Birth: _____ Male or Female: _____

Address: _____ Apt#: _____ City: _____ Zip: _____

Parent(s)/Guardian Name: _____ Emergency Contact: _____

Home/Cell Phone: _____ Work Phone: _____ Emergency Contact Phone: _____

Parent Email Address: _____ Player Email Address: _____

Has your child previously participated in GSYF&C: _____ Brave Pride Jr. Football: _____ For Whom: _____ What Year: _____

Does your child have any medical/allergy/medical disabilities? _____

If yes, please explain: _____

Family Physician: _____ Physician Phone: _____ Preferred Medical Facility: _____

Insurance Provider: _____ ID/Policy Number: _____

A **secondary carrier** provided by Greater Seattle Youth Football & Cheer will insure all registered participants and will be effective after parent/guardian's insurance has been exhausted. There will be a minimal deductible on this insurance. **Greater Seattle Youth Football & Cheer requires a physical examination for your children prior to participation.**

CONSENT FOR MEDICAL CARE AND TREATMENT

I, _____ in the event of an emergency, authorize all treatment including surgical treatment, x-rays, laboratory procedures, anesthesia, and any other necessary medical hospital procedures that may have to be performed or prescribed by a licensed physician and/or facilities for _____.

Parent or Guardian Name

Participant Name

Parent/Guardian Signature: _____ Date: _____

Witness Signature: _____ Date: _____

PICTURE RELEASE

I, _____ authorize GSYF&C and Brave Pride Jr. Football to use images of my child in all marketing materials including brochures, pamphlets, website content, videos and other electronic and printed materials.

Parent or Guardian Name

Parent/Guardian Signature: _____ Date: _____

HOLD HARMLESS AGREEMENT

Football and Cheerleading are vigorous activities and the possibility of injury does exist. I give approval and permission for my child to participate in the Greater Seattle Youth Football & Cheer and Brave Pride Jr. Football. I hereby waive all claims for legal action, financial or otherwise, against Greater Seattle Youth Football & Cheer and Brave Pride Jr. Football, their elected and appointed officials, or any volunteer connected with the program for injuries which might occur during any practice, travel, game, or other sponsored activity.

Parent/Guardian Signature: _____ Date: _____

Witness: _____ Date: _____

For GSYF&C League Use

Franchise: _____ Division: _____ Grade: _____ Age: _____

Date of Certification: _____ Certified By: _____ Proof of Age: _____

Name of GSYFC Official

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