

**CONSENT AND RELEASE FORM FOR PARTICIPATION IN
BARNSTABLE SILVER BULLETS YOUTH FOOTBALL**

**Barnstable Silver Bullets Youth Football
2009 Player Sign-Ups**

WE/I _____ of _____,
(Parent or Guardian) (Town or Village)

declare that:

1. WE/I are/am the _____ (Father, Mother, Parents or Legal Guardian) of _____, a minor, age _____, born _____, _____, and WE/I have full custody and control of the minor.
2. WE/I consent to the minor's participation in Barnstable Youth Football, Inc. for the Barnstable Silver Bullets.
3. In consideration of the minor being permitted to participate in Barnstable Youth Football conducted by Barnstable Youth Football, Inc., WE/I hereby release, waive and discharge on behalf of ourselves/myself and the minor over which WE/I have custody and control, Barnstable Youth Football, Inc., its officers, coaches, members, sponsors, promoters, and participants and each of them, their officers and employees (hereinafter "releasee") from all liability to us/me or the minor, or any legal representatives, heirs, and assigns, for any and all loss or damage, and any claims or damages resulting thereof, on account of injury to the minor's person, even injury resulting in death, whether caused by negligence of releasee or otherwise while the minor is competing in Barnstable Youth Football.
4. WE/I agree to indemnify the releasee and each of them from any loss, liability, damage or cost they may incur in connection with any claim filed against them due to the participation of the minor in Barnstable Youth Football whether caused by negligence of the releasee or otherwise.
5. WE/I hereby assume full responsibility for the risk of bodily injury or death to the minor due to the negligence of the releasee or otherwise while the minor is participating in Barnstable Youth Football.
6. WE/I hereby acknowledge that Barnstable Youth Football, Inc. will not provide insurance coverage for the minor while participating in Barnstable Youth Football.
7. WE/I hereby covenant and agree that even if Barnstable Youth Football, Inc. provides insurance coverage, WE/I shall remain fully responsible for injuries or death not covered by such insurance.
8. WE/I expressly agree that this consent, release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Massachusetts and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Parent/Guardian Signature

Date

Address

_____, MA
Town

Phone Number

In-Person registration for all players is scheduled for **Wednesday, May 13th, at the Barnstable Horace Mann Charter School gymnasium from 5:00 – 8:00 p.m. You can also register your child via U.S. Mail by sending in this form and paying online or via check. You must sign this form in order for your child to participate.**

1. New players need a **photocopy** of their **Birth Certificate**, which we can keep to provide to the league. Please **do not** bring or mail your original documents.
2. Returning players who missed one (1) or more years of play will also need a birth certificate.
3. A check, cash or credit card in the amount of **\$250.00 per child**. Please include the name of the child and group he/she will be playing for (Mites 8-9s, Pee Wees 10-11s, Midgets 12-13s) on the check or envelope (if cash).
4. **Consent form**. Please fill out front and back of application and consent form attached within and present at sign-up. Only a parent or guardian can sign it.

Weight Limits:

Mites	105 lbs.
Pee Wees	130 lbs.
Midgets	160 lbs.

We look forward to seeing you.

Barnstable Youth Football, Inc.
Silver Bullets Board of Directors and Coaching Staff
Chris Joyce, President

Send in Application to: Barnstable Silver Bullets
P.O. Box 345
Centerville, MA 02632

Or visit: www.barnstablesilverbullets.org

About the Barnstable Silver Bullets Football Program

Practice will begin on August 13th and will be held on Monday through Thursday until school starts from 5:45 – 7:30 p.m. After school starts, practices will be on Tuesday, Wednesday and Thursday evenings from 5:45 – 7:30 p.m. All practices are held at the BHS football practice complex. It is strongly recommended that players **come to practice in shape!!!!!!**

We supply all equipment, except rubber-soled cleats (metal ones and removable spikes are not allowed), athletic supporter, girdle and mouthpiece. The mouthpiece must be a color (not clear) and attach to the facemask. Prior to equipment hand-out, your child should wear shorts, T-shirt and cleats to practice.

There are three divisions within our program: Mites (8-9s), Pee Wees (10-11s), and Midgets (12-13s). Each roster will carry 40 players this season.

The official weigh-in is scheduled for **Saturday, September 12th**. **All players must attend the weigh-in if they want to play**. This is a league requirement and is **NOT** optional. Please keep this date in mind when registering your child.

Refunds for those who leave the program will be issued on or before October 1st. Players who attend the weigh-in are considered part of the official roster. If they leave the program after weigh-in, **there will be no refund** (unless they do not make weight). If you are refunded and lose or misplace your check, you will not be issued a replacement check.

All parents are expected to donate a couple of hours of their time to man the concession stand, collect gate donations, hold chains, or help with annual fund raising. You will be contacted before the weigh-in. If you have a preference, please let us know. The fund raising activities are necessary to keep the participation fee low, purchase equipment and other expenses. The Silver Bullets is a non-profit organization and the people who keep the club running are volunteers.

Mail-In Registration: Please fill out the registration form for your player and mail it with your check made payable to “Barnstable Youth Football, Inc.,” P.O. Box 345, Centerville, MA 02632. The fee to play is \$250.00.

On-Line Registration: You may pay via credit/debit card for your child’s registration fee, online via PayPal, at www.barnstablesilverbullets.org, but you still must mail this completed form.

2009 Barnstable Silver Bullets Registration Form

Player Name: _____ D.O.B. _____

Address: _____

Village: _____, MA Zip: _____

School: _____ Grade: _____

Home Phone: _____ E-mail: _____

Best Phone for Emergency: _____

Father’s Name: _____ Phone: _____

E-mail: _____

Mother’s Name: _____ Phone: _____

E-mail: _____

Status of Player: NEW / RETURNING (circle one)

How Many Previous Years in Program: 1 2 3 4 5 6 (circle one)

Estimated Weight: _____

Parent mailing address (if different from above):

Address: _____

Village: _____, MA Zip: _____

Parent Volunteer Interest: (circle one)

Coach / Snack Bar / Equipment / Fund Raising / Game Day / Anything

Official Use Only:

Birth Certificate: Received On File (circle one)

Payment Made: Yes No / Amount: \$_____ / How Made: Cash Check
#_____

Consent Form Signed: Yes No

Mites (8-9s) Pee Wees (10-11s) Midgets (12-13s)