



PLEASE MAKE NOTE OF ANY MISSING ITEMS BELOW.

(IF ALL ITEMS MARKED BY AN "X" ARE NOT TURNED IN BY THE PARENT MEETING YOUR CHILD WILL NOT BE ELIGIBLE TO BEGIN CONDITIONING/PRACTICE ON MONDAY, JULY 23RD.)

	SDYFC Contract
	Physical (original with stamp plus 2 copies)
	Report Card - Final (3 copies)
	Proof of Residency (2 copies)
	Copy of Birth Certificate (2 copies)
	MMYFC Agreement and Understanding
	AYF Waiver & Release of Liability - Minor
	AYF Image Release - Minor
	Jersey Sizing
	OTHER:
	Balance Due: \$ _____

Mira Mesa Youth Football and Cheer Association
 PO Box 261156 * San Diego * CA * 92196
www.mmchargers.org



**MIRA MESA YOUTH FOOTBALL & CHEER
"FEAR THE MECCA"**

AGREEMENT AND UNDERSTANDING

WE, _____ (PARTICIPATING CHILD'S NAME) AND
_____ (PARENT/GUARDIAN NAME), DO HEREBY
CERTIFY AND ACKNOWLEDGE WE HAVE BEEN PROVIDED WITH, HAVE READ, UNDERSTAND AND
AGREE WITH THE FOLLOWING POLICIES AND/OR AGREEMENTS:

- _____ **PARENT & ATHLETE CODE OF CONDUCT**
- _____ **GAME DAY VOLUNTEER AGREEMENT**
- _____ **EQUIPMENT RENTAL DEPOSIT POLICY**
- _____ **REFUND POLICY**

Failure to agree with the contents of the above mentioned "Policy and Procedures" and "Code of Conduct" shall preclude your child from participating in activities associated with Mira Mesa Youth Football and Cheer Association.

Date: _____ 2018

Division: _____

Participant's Name (Print Name): _____

Participant's Name (Signature): _____

Parent/Legal Guardian (Print Name): _____

Parent/Legal Guardian (Signature): _____



MIRA MESA CHARGERS

Youth Football & Cheer

Fear the MECCA



PARENT-ATHLETE CODE OF CONDUCT

All parents/guardians who have children participating within the Mira Mesa Youth Football and Cheer Association must abide by a Code of Conduct, which includes the provisions that follow.

This code is being published to protect the children and volunteers of the Association. Any violation of these rules or any Conference rules may result in immediate expulsion from Mira Mesa Youth Football and Cheer. In addition, you may forfeit your membership for the current season and be subject for review for any other subsequent year.

ALL PARENTS/GUARDIANS AGREE TO:

1. I/We agree to furnish proof of Birth - i.e.: Birth Certificate, Passport or Military ID of applicant to the Association/League Conference upon request.
2. I/We agree to furnish a copy of the most recent school years Report Card to the Association/ League/Conference upon request.
3. I/We agree that my child will participate in the "Scholars program" set up by the Association/ League/Conference. (Kindergartners and Flag programs are exempt.)
4. I/We agree to be financially responsible for Association equipment/uniform issued to applicant other than the normal wear and tear during games and practice, further I/We will reimburse the Association / League/Conference for the loss and/or damage to said equipment.
5. I/We agree to not smoke on the practice or playing field, or in the presence of a gathering of the team/squad. (i.e.: after a game/practice or team/squad meetings.)
6. I/We agree to abstain from the possession and drinking of alcoholic beverages and the possession or use of any illegal substance at any Association// League/Conference function. (i.e.: at games/practice, after a game/practice, team/squad meetings or gatherings.)
7. I/We agree not to deliberately incite and/or participate in "unsportsmanlike" conduct at ANY Association/League Conference function.
8. I/We agree to never protest a game official, judge or Commissioners decision in an aggressive demonstrative manner, which might incite violent or aggressive fan involvement.
9. I/We agree not to use abusive or profane language or actions at any time at any Association/ League/Conference function.
10. I/We agree not to criticize, belittle, antagonize, berate or otherwise incite the opposing team, its players, coaches, cheerleaders, fans, officials/judges or Commissioners by word of mouth or by gesture.
11. I/We agree to accept all decisions of the game officials, judges or Conference Officials as being fair and called to the best of their ability.
12. I/We agree to treat all children and adults while at any Association// League/Conference function with respect.
13. I/We agree to follow the proper Chain of Command when filing a complaint or voicing my opinion regarding any possible rule infraction or concern within my association or the / League/Conference organization.
14. I/We agree that any form of verbal and/or physical abuse towards any MMYFC Board Member, Coach or other badged volunteer will not be tolerated.
15. The Parent code of Conduct applies to all social media outlets. Facebook, Twitter, Myspace etc.

PARENT-ATHLETE CODE OF CONDUCT

16. I/We agree not to criticize the players/cheerleader or coach in front of other spectators in the stands, but reserve constructive criticism for later, in private.
17. I/We agree to accept the decisions of the game officials on the field as being fair and called to the best ability of said officials.
18. I/We agree that parents/spectators are not allowed on the sidelines during any game.
19. I/We agree not to interfere and/or interrupt the coaching staff before, during or games and practices when with the team.
20. I/We agree not to express complaints about coaches or volunteers in front or around the athletes at any time.
21. I/We agree that if there is a violation of the code of conduct or I/We or spectator becomes a nuisance I/We will be asked to leave by a member of the Board of Directors or by a Head Coach. If I/We or spectator fails to leave upon request, the child may be suspended from further participation of team activities.

***PARENTS PLEASE NOTE:**

All players are guaranteed 6 plays in each Jamboree, Regular Season or Playoff game. Everything beyond that must be earned in the opinion of the coaching staff whose decisions are final.

Athlete's Code

I WILL: emphasize the ideals of sportsmanship, ethical conduct and fair play. Show courtesy to my opponents and officials. Recognize athletic contests are serious educational endeavors. Give complete allegiance to my coaches who are the instruction authority for my team. Discourage fans, fellow players and parents from undercutting my coach's authority. **I WILL NOT:** Use profanity or talk "trash" before, during or after any game. Use drugs, alcohol or tobacco. Criticize my teammates. Act in any way that my incite spectators.

Parent's Code

I WILL: Support my child's team/squad and teach the value of commitment to the team/squad – emphasize the ideals of sportsmanship, ethical conduct and fair play. Help my child and Youth Football make athletic contests a positive educational experience. Show courtesy to opponents and officials. Direct constructive criticism of my child's athletic program to the athletic director or association officials and work toward a positive result for all concerned. **I WILL NOT:** Criticize officials, directly abuse or use profane language toward them, or otherwise subvert their authority. Undermine, in work or deed, the authority of the coach or administration. Intrude onto the field, stand on the sideline, or yell from the bleachers at or to the coaches, referees or administration.

MMYFC REGISTRATION & FINANCIAL FORM

Registration Date: ____/____/2018

FOOTBALL CHEER 7U 8U 9U 10U 11U 12U 13U 14U

PARTICIPANT'S NAME: _____

BIRTHDATE: ____/____/____ AGE: ____ GRADE: ____

ADDRESS: _____

CITY: _____ ZIP: _____

MOTHER/LEGAL GUARDIAN

NAME: _____

CELL PHONE: (____) _____

EMAIL: _____

FATHER/LEGAL GUARDIAN

NAME: _____

CELL PHONE: (____) _____

EMAIL: _____

***** *For Association Use Only* *****

Registration Fee: \$ _____

Date	Payment	Receipt #	Total	Balance

Return

New

Referred by: _____

Equipment Deposit - Check # _____ Amount \$ _____



MIRA MESA CHARGERS

Youth Football & Cheer

Fear the MECCA



JERSEY & SPIRIT PACK SIZING SHEET

DATE: _____ TIME: _____

ATHLETE NAME: _____

TEAM: _____ Blue or Gold

FOOTBALL SPIRIT PACK

1.	Spirit Pack Shirts:	YXS	YS	YM	YL	YXL	AS	AM	AL	AXL	A2XL
2.	Spirit Pack Shorts:	YXS	YS	YM	YL	YXL	AS	AM	AL	AXL	A2XL

FOOTBALL JERSEY, PRACTICE JERSEY & PANT

1.	Jersey/Flag:	YXS	YS	YM	YL	YXL	AS	AM	AL	AXL	A2XL
2.	Jersey/Tackle:	YS	YM	YL	YXL	AS	AM	AL	AXL	A2XL	A2XL
3.	Practice Jersey:	YXS	YS	YM	YL	YXL	AS	AM	AL	AXL	A2XL
4.	Football Pant:	YXS	YS	YM	YL	YXL	AS	AM	AL	AXL	A2XL

LAST NAME ON JERSEY

(One letter per box—please print clearly)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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JERSEY NUMBER CHOICE

(Please note that number choices will be given on first come first request basis. Please be sure to fill in the DATE & TIME blanks above. If there is no date or time your request will be considered last)

1st Choice 2nd Choice 3rd Choice



SAN DIEGO YOUTH FOOTBALL AND CHEER CONFERENCE, INC.

PHYSICAL EXAMINATION FORM

ORIGINAL AND TWO COPIES ARE REQUIRED TO COMPLETE YOUR REGISTRATION

ASSOCIATION NAME: _____

DIVISION: F 8U 9U 10U 11U 12U 14U CHEER
(CIRCLE ONE)

Athlete's Name: _____
(Last Name, First Name, MI)

Birthdate: _____ Phone: _____

Address: _____, CA _____
(city) (zip)

Physician Name: _____ Physician Phone: _____

The above named athlete has my permission to participate in San Diego Youth Football and Cheer Conference, Inc. activities and has permission to travel with a representative of San Diego Youth Football and Cheer Conference, Inc. and the local Association on any trips. In case of injury a San Diego Youth Football and Cheer Conference, Inc. representative is authorized to have him/her treated and/or hospitalized by any one of the doctors cooperating with San Diego Youth Football and Cheer Conference, Inc., and will not hold San Diego Youth Football and Cheer Conference, Inc., the local Association or its representatives responsible for payment as the result of any accident or injury.

Medical History (to be completed by parent/guardian)

R or L Handed _____ Allergies to medications _____

Has athlete had the following:

- Injuries to head, neck, bones or joints
- Any other injuries requiring medical attention
- Seizures, blackouts or any episode of unconsciousness
- Heart trouble, heart murmur, high blood pressure
- Any serious infectious disease
- Hospitalization or operations in the past
- Stomach, intestinal, or urinary tract problems
- Is athlete under care of a doctor now
- Is athlete taking any medication on a regular basis
- Any dental problems

(ALL boxes must be checked)

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Explain "Yes" Answers

Parent or Legal Guardian Signature _____ Date _____

Physical Examination (to be completed by physician)

DATE OF PHYSICAL: _____

Physical Exam	
HEIGHT:	WEIGHT:
BLOOD PRESSURE:	HEART:
PULSE:	LUNGS:
GENERAL APPEARANCE:	CHEST (including Breasts):
DERM:	ABDOMEN:
HEAD	GENITALIA:
NECK	BACKD & EXTREMETIES:
	NEUROLOGICAL:

From the above information and the screening physical exam, in my opinion the above mentioned Athlete is physically able to participate in San Diego Youth Football and Cheer Conference, Inc. activities.

YES NO

Is further consultation necessary?

YES NO Specialty _____

Dr. Office Seal or Stamp Here. If "NONE" Then Attach the Doctor's Business Card Here. (Required)

Physician's Signature: _____ M.D. Date _____



FOR OFFICIAL USE ONLY

San Diego Youth Football & Cheer Conference
Members of American Youth Football, Inc. an NFL Youth Partner

2018 Season Contract [] Football [] Cheer Color: _____

Division: [] F [] 8U [] 9U [] 10U [] 11U [] 12U [] 14U

Association: _____

Picture Here (1.5" X 1.5")

Executive Director

SECTION I: NO CANDIDATE WILL BE PERMITTED TO PARTICIPATE IN ANY ACTIVITY UNTIL ALL PAPERWORK IS COMPLETED IN FULL

Form fields for personal information: LEGAL NAME, DATE OF BIRTH, AGE, ADDRESS, CITY, ZIP, Phone, School, Fall Grade, Emergency Contact, Phone, Medical Insurance Company, Parent Email

SECTION II: PARENTAL CONSENT

I/WE THE REGISTERING PARENTS/LEGAL GUARDIANS OF THE ABOVE NAMED CANDIDATE FOR A POSITION ON A SDYFCC TEAM/SQUAD HEREBY GIVE MY/OUR APPROVAL TO PARTICIPATE IN ANY AND ALL SDYFCC ACTIVITIES DURING THE CURRENT SEASON. I/WE ASSUME ALL RISKS AND HAZARDS INCIDENTAL TO SUCH PARTICIPATION INCLUDING TRANSPORTATION TO AND FROM THE ACTIVITIES AND WE DO HEREBY WAIVE, RELEASE, ABSOLVE, INDEMNIFY AND AGREE TO HOLD HARMLESS THE LOCAL TEAM, THE RESPECTIVE ASSOCIATION AND THE CONFERENCE, NATIONAL AFFILIATE, THE ORGANIZERS, SPONSORS, SUPERVISORS, PARTICIPANTS, AND PERSONS TRANSPORTING MY/OUR CHILD.

SECTION III: INSURANCE STATEMENT

I/WE UNDERSTAND THAT MY/OUR INSURANCE IS PRIMARY AND ANY SDYFCC INSURANCE BECOMES SECONDARY. (IF YOU HAVE NO INSURANCE, SDYFCC INSURANCE IS THE PRIMARY CARRIER, A DEDUCTIBLE MAY APPLY PLUS YOUR PORTION OF THE CHARGES)

SECTION IV: PARENT MEDICAL TREATMENT AUTHORIZATION

IN THE EVENT OF INJURY OR ILLNESS TO MY/OUR CHILD (LEGAL NAME ABOVE IN SECTION I) I/WE HEREBY GRANT AUTHORITY TO A QUALIFIED PHYSICIAN TO RENDER SUCH MEDICAL TREATMENT AS SAID PHYSICIAN DEEMS NECESSARY UNDER THE CIRCUMSTANCES.

SECTION V: HELMET WAIVER (FOR FOOTBALL PARTICIPANTS)

WE ACKNOWLEDGE AND WE UNDERSTAND THE RISKS INVOLVED IN OUR CHILD PLAYING FOOTBALL, WHICH IS A COLLISION SPORT: THE NOCSAE COMMITTEE HAS ADOPTED THE FOLLOWING WARNING TO BE READ BY AND SIGNED BY THE PARENT/GUARDIAN. "DO NOT USE THIS HELMET TO BUTT, RAM OR SPEAR AN OPPOSING PLAYER. THIS IS IN VIOLATION OF FOOTBALL RULES AND CAN RESULT IN SEVERE HEAD, BRAIN OR NECK INJURY, PARALYSIS OR DEATH AND POSSIBLE INJURY TO YOUR OPPONENT. THERE IS A RISK THAT THESE INJURIES MAY ALSO OCCUR AS A RESULT OF AN ACCIDENTAL CONTACT WITHOUT INTENT TO BUTT, RAM OR SPEAR. NO HELMET CAN PREVENT ALL SUCH INJURIES."

*****PARENT(S)/GUARDIAN MUST INITIAL HERE X _____ PARTICIPANT MUST INITIAL HERE X _____

SECTION VI: REGISTERING PARENT/LEGAL GUARDIAN ONLY (PROOF OF LEGAL GUARDIANSHIP REQUIRED)

I/WE AS REGISTERING PARENTS (OR LEGAL GUARDIAN) AGREE TO/AND UNDERSTAND SECTIONS I, II, III, IV, AND V OF THIS LEGAL DOCUMENT

PRINT NAME _____ SIGNATURE _____ DATE _____

SECTION VII: FOR OFFICIAL USE ONLY

A. Mother's Maiden Name from BC: _____ [] Original Birth Certificate Verified [] 2 Proof of Residency

I certify that all required paperwork was completed in full prior to this applicant's participation in any of the teams activities.

President/Eligibility Dir. or Cheer Dir. Signature: _____ Date: _____

This original form, with a COLOR photo and two (2) copies are required to roster certify the player
"APPROVED" SPECIAL WAIVER REQUESTS MUST BE ATTACHED FOR WAIVERED PLAYER(S)

MIRA MESA YOUTH FOOTBALL AND CHEER (MMYFC)

Policy and Procedures

GAME DAY VOLUNTEER AGREEMENT

Game Day Field Duty and Home Game Concessions Duty for the Mira Mesa Youth Football and Cheer Association is **MANDATORY** for **ALL** participants. Your Field and Concessions Duties will be assigned by your individual General Manager (GM) and/or Team Mom/Dad. Field duties consist of: MPR (Minimum Plays Required) Away, MPR Home and Chain Gang. These duties will be discussed in more detail once we get closer to our first Game Day. Concession duty is scheduled in 1-2 hours shifts before your child's game. All changes or scheduling issues in regards to your assigned duties should be discussed with your GM and/or Team Mom. If you are late or do not show to your assigned shift your child will not be allowed to play/cheer in that game. Please be proactive, it is your responsibility to know of your volunteer assignments prior to "Game Day". GM's will utilize face-to-face, text, email, Shutterfly and other means to communicate these assignments to you.

In addition, GM's from each individual team will have a game day "Snack Rotation" (your family will be responsible to prepare a "snack bag") or "Slush Fund" (\$20 paid by each family on their team and the GM prepares all the snacks on the teams' behalf). Snacks are provided for the children during half-time and after-game.

EQUIPMENT RENTAL DEPOSIT POLICY (Football ONLY)

For 7U Flag Players: Helmet rental (\$75.00 deposit)

For Tackle Players: Helmet, pads, pants and practice jersey rental (\$200.00 deposit)

Check deposit will be required on "Equipment Distribution Day" in August for the amount stated above. These checks will be held until "Equipment Return Day" in December. All equipment not returned will be deposited on December 31st.

REFUND POLICY

It is important that there is a mutual understanding between parents and MMYFC regarding the **NO REFUND POLICY**. In order to operate; MMYFC has to prepay for insurance, field usage, refurbishment of the football gear, and other required administrative items. We prepay for most things prior to the season starting and cannot recoup them in the event your child decides he/she does not want to continue participating. MMYFC does not issue refunds for any Cheer uniforms and/or Cheer accessories purchased. It is for this reason MMYFC has a **NO REFUND POLICY**.

Refunds will be issued in the following circumstances:

If the MMYFC District is unable to field a football team in a particular division, a full refund will be given to each participant signed up for that division. Cheer squad participants will be issued a full refund if MMYFC is unable to field a cheer squad to which your cheerleader is eligible to participate.



AMERICAN YOUTH FOOTBALL

Waiver and Release of Liability - Minor



ASSOCIATION NAME - _____

READ BEFORE SIGNING

IN CONSIDERATION OF _____, my child/ward, being allowed to participate in any way in American Youth Football, Inc.(AYF) or American Youth Cheer dba, Regional/National Championships, _____ my Local AYF Affiliation(s), athletic sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1) The risk of injury to my child/ward, myself, from the activities involved in these programs is significant, including the potential for permanent disability, paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- 2) FOR MYSELF, SPOUSE, AND CHILD/WARD, 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 child/ward, participation; and,
- 3) 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/wards', readiness or, hazard during my presence or participation, and/or in the program itself, I will remove my, child/ward, from participation and bring such to the attention of the nearest official immediately; and,
- 4) I, for myself, my spouse, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS American Youth Football, Inc.(AYF), American Youth Cheer dba, my Local AYF Affiliation, their officers, directors, officials, volunteers, agents, and/or employees, other participants, sponsoring agencies, tournament host, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, incident to my child/wards', involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, TO THE FULLEST EXTENT PERMITTED BY LAW.
- 5) I, for myself, my spouse, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my child/ward's involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Print Name of Parent/Guardian:

Parent/Guardian Signature:

Date Signed:

UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

Print Participant's Name:

Participant's Signature:

Date Signed:

NOTE: This form as with any and all forms used by your Association should be reviewed by your local counsel for compliance with any state or local statutes. This form should be kept on file for a minimum of 7 years, longer in the event of an injury. Please confer with your local attorney for advice as to the appropriate maintenance and storage term for this and all such forms.



AMERICAN YOUTH FOOTBALL



Image Release – MINOR

ASSOCIATION NAME - _____

READ BEFORE SIGNING

In consideration of (insert child's name) _____, my minor child/ward being allowed to participate in any way, in the American Youth Football, Inc. ("AYF") (dba American Youth Football and American Youth Cheer,) national championships and any other official AYF events and activities, the undersigned agrees that American Youth Football Inc., is hereby granted the unrestricted right and permission, free from approval or review, to copyright and/or use my child's/ward's likeness in all media now or hereafter known, including but not limited to, pictures and videos of my child which he/she may be included intact or in part for promotion or other commercial use.

Print Name of Parent/Guardian:

Parent/Guardian Signature:

Date Signed:
