



AMERICAN YOUTH FOOTBALL

Medical Clearance Form



ASSOCIATION NAME - _____

Medical Clearance Form - Must be dated after January 1st of the Current Season

I, as evidenced by my name and signature below, do certify that I am licensed MD and or DO in the state of _____ and am qualified in determining that:

(Childs Name:) _____ is physically fit and I have found no medical or observable conditions which would contra-indicate his/her from participating in youth flag football, tackle football, cheer, dance, step or athletic activities.

I am therefore clearing this individual for athletic participation.

Please Print - or - Use Office Stamp Here:

<p>Signature: _____</p> <p>Date: / /</p> <p>(Must be dated after January 1st, of the Current Season)</p> <p>_____</p>	<p>Print Name Clearly: _____</p> <p>Office Address: _____</p>
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PLEASE NOTE: If this Medical Clearance is voided by injury, accident, or illness, it will be the responsibility of the Parent/Legal Guardian to notify the participants Coach and League Officials. It will also be the responsibility of the Parent / Legal Guardian to obtain WRITTEN permission from his/her physician (either MD or DO) to resume participation. A "Doctors Resume Participation Medical Clearance Form" is available from the league or you may have the doctor supply his/her own WRITTEN Clearance as long as it is on the doctor's official stationery and includes the following statement: "(Participants Name) is physically fit and I have found no medical or observable conditions which would contra-indicate him/her from participating in youth flag football, tackle football, cheer, dance, step or athletic activities. I am therefore clearing this individual for athletic participation.

This statement must be supplied by the physician attending to the injury, accident, or illness.

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: _____



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 the American Youth Football American Youth Cheer Regional/National Championships, and or the football and or cheer programs of _____, the Local Organization, which is a legally distinct and organization not operated or controlled by American Youth Football, despite its membership with American Youth Football, Inc. the undersigned acknowledges and agrees that:

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,

1. 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; and,
2. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,
3. 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 American Youth Football, Inc.; its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the 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.
4. I, for myself, my spouse, my child, 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 involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
5. 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.

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 Name of Participant: _____

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.

Emergency Medical Treatment, Consent and Information

The following information will be used in the event that a parent / legal guardian is not available. The purpose of this information is to provide a quick reference for medical personnel should the need arise. Please fill out this form completely. If a particular question is not applicable write "none", n/a, or other appropriate comment otherwise none will be assumed. If additional space is needed, please use the back of this form. All information disclosed here will be treated as confidential. It will be the responsibility of the parent/legal guardian to notify the participants coach and league/event officials if any information needs to be added, deleted, changed, or updated in any way.

ATHLETE INFORMATION				
Athlete's Name:		Nick Name:		Phone: ()
Address:		City:		State: Zip:
PARENT OR GUARDIAN INFORMATION				
Father's Name:				
Address:		City:		State: Zip:
Hm Phone: ()	Daytime Phone: ()		Email:	
Employer:				
Mother's Name:				
Address:		City:		State: Zip:
Hm Phone: ()	Daytime Phone: ()		Email:	
Employer:				
Guardian's Name:				
Address:		City:		State: Zip:
Hm Phone: ()	Daytime Phone: ()		Email:	
Employer:				
FAMILY MEDICAL INSURANCE				
Carrier:		Group:		
Policy #:		Group #:		
Policy Holder Name:				
Family Physician's Name:				
Dr's Address:		City:		State: Zip:
Phone: ()	Fax: ()		Email:	
EMERGENCY MEDICAL INFORMATION				
Preferred Hospital(s):				
EMERGENCY CONTACT:		Phone: ()		Relationship:
Please list any medical conditions (allergies, asthma, etc.) And medications being taken by the participant named above. Please list any other information you may deem relevant, and helpful to emergency medical personnel: (please note if no information is given and the words "none" or "n/a" is not filled in then, "none" will be assumed.				
Allergies:				
Medical Conditions:				
Other:				

*I, _____ as evidenced below hereby grant permission for my child/ward to participate in any and all, _____ (Association name) and, American Youth Football, Inc. program(s) event(s), including but not limited to, athletic, social and/or fundraising activities. I further consent to the administration of any and all medical treatment necessary to stabilize and or treat any medical condition or medical emergency to which my child/ward is afflicted. I understand that this authorization is given prior to the need for medical care, but given in advance to avoid any unnecessary delay in emergency treatment which the attendant and/or medical professional may deem advisable in the exercise of their best judgment.

*Print Parent/Legal Guardian Name

*Signature Parent/Legal Guardian

*Date

The original Emergency Medical Treatment, Consent and Information form should travel with the coach and a copy should be kept at the administrative office of the sports organization. Due to privacy concerns, completed forms should be stored in a secure location with access restricted to those on a need to know basis for the purpose of medical care.

Participation Contract, Tracking and ID Card - Page 2

Last Name	First Name	Initial	Preferred (nick) Name		
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 30%;" type="text"/>	<input style="width: 95%;" type="text"/>		
Street Address	City / Town	State	Zip Code	Home Phone	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 30%;" type="text"/>	<input style="width: 30%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Date Of Birth (M/D/YR)	Age as of 7/31	Weight	Parent/Guardian First Name	Parent/Guardian Last Name	
<input style="width: 30%;" type="text"/>	<input style="width: 30%;" type="text"/>	<input style="width: 30%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Grade in Fall	School in Fall	School Phone	Home Email Address		
<input style="width: 30%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 30%;" type="text"/>	<input style="width: 95%;" type="text"/>		
Medical Insurance (circle one)	Name Of Insurance Carrier	Policy #			
<input style="width: 30%;" type="text"/> YES / NO	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>			
Football: <input type="checkbox"/>	Cheer: <input type="checkbox"/>	--CHECK ONE --		Registration Fee: \$ <input style="width: 30%;" type="text"/>	Check# Cash: <input style="width: 30%;" type="text"/>

GRAY AREAS FOR OFFICIAL USE ONLY !!

Association: _____	Division: _____	Team: _____
Jersey Number Assigned: _____	Equipment / Uniform Issued <input type="checkbox"/> Returned <input type="checkbox"/>	

PERMISSION TO PARTICIPATE

I acknowledge that I am fully aware of the potential dangers of participation in any sport and I fully understand that participation in football, cheerleading, dance and/or step may result in SERIOUS INJURIES, PARALYSIS, PERMANENT DISABILITY AND/OR DEATH. Furthermore, I fully acknowledge and understand that protective equipment does not prevent all participant injuries. I, the parent/guardian of the above-named participant, do hereby give my approval for my child/ward to participate, and further assert that I have verified with my child/wards' physician, and in my opinion, my child/ward is physically fit and can participate without limitation in any and all Local, Regional, National, League/Conference, Association and team/squad activities, including transportation to and from the activities by a licensed driver.

SCHOLASTIC FITNESS

I am of the opinion that my son/daughter/ward is scholastically fit and would benefit by participation in this program. I agree to submit a copy of my son/daughter/ ward's last completed grade, end of year/last complete report card or a written statement of scholastic fitness from the school administration.

Initial: _____

HELMET WAIVER (for football participants)

We acknowledge, AND WE understand the risks involved in my CHILD/WARD, my playing FOOTBALL, which is a collision sport; the NOCSAE committee has adopted the following warning to be read by, and signed by, both the parent/guardian and participant. "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."

Initial: _____

EQUIPMENT UNIFORM RESPONSIBILITY

I assume full responsibility for any and all equipment/uniforms loaned to my child/ward and I agree to promptly return, upon request, the uniform and other equipment in as good condition as when received except for normal wear and tear. If I fail to adhere to this policy, I will be responsible for and promptly pay the replacement cost of such equipment.

Parent/Guardian Initial: _____ Player Initial: _____

CODE OF CONDUCT

The Ideology Of Youth Sports Including This Program Is To Promote Good Understanding And Fundamental Knowledge Of The Sport. It Is Also Critical That Good Sportsmanship Including The Ability To Always Conduct Oneself In An Appropriate Manner Of Positive Accord Both On And Off The Field. It Is Understood That Any Incident Considered Detrimental To The Pursuit Of This Ideology Will Not Be Tolerated. It Will Be Addressed In Accordance With The Statutes Of The Association, Conference, Current National Affiliation, State and Local Laws, And May Result In Dismissal From The Program And The Inability To Participate In Any Future Related Activities Of The Association. This Code Of Conduct Applies To All Involved With The Program Including But Not Limited To, The Football Players, Cheerleaders, Spirit Participants, Parents And Guardians.

Initial: _____

PRINT Parents/Guardian Name: _____

Parents/Guardian 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.



**Mild Traumatic Brain Injury (MTBI) / Concussion
Annual Statement and Acknowledgement Form**

I, _____ (athlete), have chosen to participate in an a sport where injuries may occur and I do understand that it is my responsibility to report all of my injuries and illnesses or suspected injuries and illnesses to the organization’s staff, including but not limited to: coaches, team physicians, and athletic training staff. I further understand and recognize that my health and safety is the most important thing and without disclosing all injuries and or illnesses, it can not be properly determined if you are in the physical condition necessary to participate. I understand that I must provide a full and accurate medical history including any symptoms, health complaints and any prior injuries and/or disabilities I have experienced before, during or after athletic activities.

By signing below, I acknowledge:

- My organization has provided me with specific educational materials including the CDC Concussion fact sheet (<http://www.cdc.gov/concussion>) on what a concussion is and has given me an opportunity to ask questions.
- I ACKNOWLEDGE THAT I HAVE READ THE FACT SHEET on the CDC website for Parents and Players.
- I have fully disclosed to the staff any prior medical conditions and will also disclose any future conditions.
- There is a possibility that participation in my sport may result in a head injury and/or concussion. In rare cases, these concussions can cause permanent brain damage, and even death.
- A concussion is a brain injury, which I am responsible for reporting to the team physician, athletic trainer, coach, parent volunteer, or official.
- A concussion can affect my ability to perform everyday activities, and affect my reaction time, balance, sleep, and classroom performance.
- Some of the symptoms of concussion may be noticed right away while other symptoms can show up hours or days after the injury.
- If I suspect a teammate has a concussion, I am responsible for reporting the injury to the staff.
- I will not return to play in a game or practice if I have received a blow to the head or body that results in concussion related symptoms.
- I will not return to play in a game or practice until my symptoms have resolved AND I have written clearance to do so by a qualified health care professional.
- Following concussion the brain needs time to heal and you are much more likely to have a repeat concussion or further damage if you return to play before your symptoms resolve.

Based on the incidence of concussion as published by the CDC football and cheer, among other sports, have been identified as high risk for concussion.

I represent and certify that I and my parent/guardian have read the entirety of this document and fully understand the contents, consequences and implications of signing this document and agree to be bound by this document.

Student Athlete:

Print Name: _____ Signature: _____

Date: _____

Parent or legal guardian must print and sign name below and indicate date signed.

Print Name: _____ Signature: _____

Date: _____

2020 - AYF Code of Conduct Form

Tyngsboro Youth Football and Cheer (TYFC) will not tolerate verbal abuse of its volunteer coaches from any Fan, Parent or Spectator.

This is American Youth Football, not the pros. Fans, as well as the players and coaches, are expected to abide by a code of conduct at all American Youth Football Events. While 99% of the adults in the program will abide by this code without being told, this code is being published to protect the children and volunteers (which includes all coaches and board members) from the 1%.

FANS' CODE OF CONDUCT

Fans will abide by a Code of Conduct which includes the provisions which follow. If any of these rules are broken, TYFC shall have the authority to impose a penalty.

Fans shall:

1. Not criticize the players/cheerleaders or coaches in front of the other spectators in the stands, but reserve constructive criticism for later, in private.
2. Accept decisions of the game officials (including referees and coaches) on the field as being fair and called to the best ability of said officials.
3. Not criticize an opposing team, its players, coaches, or fans by word-of-mouth or by gesture.
4. Refrain from using physical or verbal abuse or profane language at any time at the game, practice field, or other AYF functions.
5. Abstain from being under the influence of or in possession of and/or drinking alcoholic beverages and the possession or use of any illegal substance on both the game and practice fields.
6. Not be allowed on the sidelines during a game.
7. Not interfere/interrupt the coaching staff before, during or after games or at practice.
8. Not express complaints about coaches in stands or to coaches in front of or around the children (i.e. right after a game or practice).

VIOLATION

Any parent or fan who violates the code of conduct risks the further participation of the child in the program. The procedure is as follows:

1. Any fan who violates the code of conduct or becomes a nuisance will be asked to leave by the head coach and can be suspended from all team activities.
2. If the fan fails to leave upon request, the child may be suspended from further participation in team activities by the head coach.
3. The head coach along with the executive board will decide if the duration of the suspension is to be longer than one to four weeks or if the child will be dropped from the program. That decision will depend on the attitude of the parents.
4. Any parent or fan who violates the code of conduct risks the future participation of his/her children in the program. Depending on the severity of the incident the board of directors may decide to ban future participation in the program for up to three years.

CONDUCT OF ALL PLAYERS - PARENTS

All players are guaranteed a minimum number of 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: emphasis 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 instructional 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 may incite spectators.

Parent's Code

I will: Support my child's team/squad and teach the value of commitment to the team/squad - emphasis the ideals of sportsmanship, ethical conduct and fair play. Help my child and American 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, direct abuse or 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.

Please cut along this line, sign, and return to the head coach

I have read the ***FAN'S CODE OF CONDUCT*** and understand what is expected.

Child's Name (PRINT)

Team Name

Date

Parents Name (PRINT)

Parents Signature

Date

This part of the form must be returned to the head coach before the second game to the season.

TYNGSBORO YOUTH CHEERLEADING PARENT & ATHLETE STANDARDS OF ORGANIZATION AND BEHAVIOR



You have registered to participate in Tyngsboro Youth Cheer's 2020 fall season - welcome! We ask that all athletes and parent/guardians review this document in its entirety. Return the following forms to your Team Administrator before the first practice. You will not be allowed to participate in practices or events until these important items are returned.

Please note that this document is subject to change in 2020 due to COVID-19.

DOCUMENTS

- AYC Registration Packet
 - Medical Clearance dated in 2020
 - Emergency Medical Treatment, Consent & Information
 - Participation Contract, Tracking & ID Card
 - Image Release
 - Waiver & Release of Liability
 - AYF Code of Conduct Form
 - MTBI Acknowledgement
- 2019-2020 Final School Year Report Card
- Original Birth Certificate and a copy of the same (new participants)
- TYFC Cheer Standards - Signature Page

CONTACTS

- *Cheerleading General* – Shannon Tellier, Cheerleading Director, cheerdirector@tyngsboroyouthfootball.com
- *Cheerleading General* – Jillian Sybert, Assistant Cheerleading Coordinator, assistantcheercoordinator@tyngsboroyouthfootball.com
- *Team Information* – Head Coach

COMMUNICATIONS

- Email is our primary means of communication. Any information that needs to be disseminated to athletes and parents/guardians will be sent via this method. Coaches may utilize social media and/or text as additional tools; but email will be the main resource and should be checked regularly for any/all updates.
- Team assignments and practice schedules will be distributed in July.
- All event dates, venues, and itineraries will be released as soon as that information becomes available to us.

The following applies to all members of TYFC, including athletes and family members.

STANDARDS OF ORGANIZATION AND BEHAVIOR

GENERAL

- The Cheerleading Director reserves the right to place athletes on the team that they feel best suits their age and ability. There is no guarantee that your child will be placed on the same team as their friends or siblings, or with a specific coach or team.
- TYFC Cheer's objective is to grow our athletes through a team experience. Every athlete is equally important to a routine. The coaching staff will place athletes where they are needed. An athlete's designated role on the team is not up for discussion.
- Teams compete at different levels. Your team's division is determined by the Head Coach based on what is best for the team as a whole.
- Unless otherwise communicated, only rostered athletes and coaches are allowed in the gym. Parent Showcases will be scheduled throughout the season for special viewing.
- No cell phones/electronics may be used once practice is in session, except in the case of emergency. Devices should be turned off or placed on silent mode.
- Any athlete who is *competing* with another cheer team during the AYC season (all-star, school, church, etc.) cannot participate in the TYFC program.
- Athletes should not be dropped off at practices or events unless a member of their coaching staff is present. Athletes should be picked up promptly after each practice/event.
- During practice, athletes must remain in the gym at all times.
- Athletes are not allowed to be present in any part of the school building other than the gym for any reason at any time.
- Coaches are not responsible for personal belongings; athletes are responsible for keeping track of all items that they bring with them to practices and events.
- Athletes are expected to clean up all trash and be respectful of all facilities.
- Coaches are not permitted to transport athletes in their vehicles at any time.
- All choreography and music is copyright protected and should not be shared with others. No routine videos should be uploaded to any online site until the season is over.
- No one is permitted to establish a social media or website in the likeness of TYFC.
- Parents/guardians must obtain approval from the Cheer Director prior to hosting team gatherings (ex: spaghetti dinner, pre or post competition events, team bonding, etc).

HEALTH & SAFETY

- If an athlete has a medical condition, please inform the coaches.
- Athletes/parents should immediately notify the coach of any injury sustained as a result of a TYFC activity.
- Athletes will need to provide a written physician's note if unable to participate, including the duration of time that participation is limited.
- Athletes will need a completed AYC Resume Participation Medical Clearance form submitted to the coach in order to return to practice after being out (signed by physician). No other written note will be accepted.
- Athletes must refrain from the use of illegal drugs, alcohol, and tobacco.

- If an athlete must wear a medical appliance, such as a brace, a note from their physician must be supplied for them to actively participate (providing it does not violate AYC regulations).
- Athletes should bring medical devices (including inhalers and epi-pens) to events and practices if necessary. This is the responsibility of the parent/athlete.
- Coaches may not dispense medication to athletes.
- Athletes may not chew gum during practices or events.
- No food is allowed in the gym.
- Only rostered coaches may lead practice (safety certified, CORI checked, board approved).

SPORTSMANSHIP

- Athletes are expected to cheer on TYFC sister teams and other squads (including opponents) at competition/events.
- Athletes and family members are expected to accept placements and awards with dignity and class.
- Athletes and family members are expected to display a high level of sportsmanship at all times.

CONDUCT

TYFC Cheer's focus is on the athletes and their experience. We have zero tolerance for anyone whose priorities are not aligned with this mission. Anyone violating conduct rules will be subject to expulsion from league.

- Athletes and family members are expected to adhere to TYFC's zero tolerance bullying policy.
- TYFC has zero tolerance for actions that create a hazard/danger to other athletes.
- Be respectful and courteous to everyone. This includes teammates, parents, coaches, board members, officials, staff at competitions, other teams, etc.
- Athletes may not create a cheer team group chat unless a coach is included on the thread.
- Parents/guardians speak for themselves and for their own children; but not on behalf of others. You may reach out to TYFC individually. Group complaints or emails will not be responded to.
- TYFC has zero tolerance for team/program gossip and parental drama. Anyone infusing this into our program will be subject to removal from the program.
- Teams are age based per AYC rules and include participants of various skill and experience levels. Everyone is growing and learning at different paces. There should be no chatter amongst athletes or family members regarding any athlete's ability. We applaud the efforts of all participants.
- Social media is a great way to show support of your team. It is not a venue to complain about cheer, athletes, coaches or program. If you have an issue that you feel strongly about, connect with designated TYFC representatives.
- Athletes and family members should not attempt to pressure or persuade coaches into

decisions relative to the team.

- Refrain from confrontations of any sort.
- No undesirable displays at any time including foul language or inappropriate gestures.
- Family members are asked not to interrupt practices or events. Please wait until the event has ended to speak with a coach.
- Family members may not enter athlete areas at competition events.

DRESS CODE

To avoid safety issues, proper clothing is required for practice. Please come dressed to work out. Inappropriate dress will result in sitting out at practice.

- Non-revealing t-shirts or tanks that can be tucked in (no spaghetti straps)
- Shorts (no jeans)
- Sports bras may be worn but must be covered by a shirt
- Laced up cheerleading sneakers with good support and flat heel, no high tops (please wear competition sneakers to all indoor practices)
- Absolutely no jewelry (this includes new earrings and body piercings)
- Hair must be tied back, away from face
- Athletes should not use bobby pins to secure hair (please use gymnastics clips)
- Athletes should use only clear nail polish
- All fingernails must be cut short, artificial/acrylic nails are not allowed to be worn during the cheer season
- No tattoos or stickers are allowed
- No glitter of any kind is allowed
- Natural looking makeup is permitted

ATTENDANCE

Cheerleading is a TEAM sport commitment. Everyone plays an important role.

Practices are mandatory, and attendance at all competitions and events is required. TYFC reserves the right to remove any athlete from the program due to excessive absences (excused and unexcused). All athletes should participate with the same level of commitment. If your child is involved in other activities, please make sure there are no conflicts.

Each cheerleader will receive *4 unexcused absences* **including in the month of August** (cannot be the week of a competition). Once you have used these 4 unexcused absences, if you miss another practice you will be removed from the competition team. Written warnings will be issued following the 3rd and 4th (final) unexcused absences. Our athletes are always working on physical conditioning, improving technique and learning new skills; and excessive absenteeism jeopardizes the safety of the entire team. Excused absences include illness (must have a doctor's note), religious services, death in the family or school obligation (with note from school). Exceptions can be made at the discretion of the Head Coach. Parents must speak with the coach to work out these exceptions.

- Every athlete is required to be at every practice and event on time.
- Athletes must be ready to participate in all TYFC activities including those unexpectedly added throughout the season.
- Notify your coach immediately of all expected absences or tardiness. This should not be on the day of practice unless there is an unexpected emergency.
- If athletes are not feeling well (no doctor's note), they should be observing in the gym. Call or email prior to practice to let coaches know that athlete will be sitting out.
- If an athlete is late to or leaves early from practices and/or events 3 times it will be handled as 1 unexcused absence.
- If an athlete is going to miss one competition, he/she will not be permitted to compete in the others. Parents are asked to inform coaches in advance so the coach can plan accordingly.
- If a game team athlete is not present for pre-football game warm-ups, he/she will not be allowed to participate in the half time performance.

NATIONALS ADVANCEMENT

Advancement to Nationals can, and has, happened. Athletes should be prepared to attend this event (not applicable to U8).

- American Youth Cheerleading holds their annual 'American Youth Cheer, Dance & Step National Championship' competition in mid-December.
- TYFC will send teams that place 1st, 2nd and 3rd at New England Regionals to the National competition.
- The AYC National Championships are held in Kissimmee, Florida.
- Competition events will last approximately four days.
- The estimated cost per person for the Nationals trip is \$1,500. TYFC will assist with organizing fundraising to lessen the financial burden; but parents/guardians are ultimately responsible for these fees.
- Athletes may attend with family members; or they may travel with a coach or teammate's parent (with waiver).

Parents/guardians understand that if their athlete's team places 1st, 2nd or 3rd at New England Regionals, he/she will be required to attend the AYC National Competition in Florida.

TYNGSBORO YOUTH CHEERLEADING
PARENT & ATHLETE
STANDARDS OF ORGANIZATION AND BEHAVIOR AGREEMENT



I have read the *Tyngsboro Youth Cheerleading Parent & Athlete Standards* and understand all of the standards of organization and behavior outlined:

- General
- Health & Safety
- Sportsmanship
- Conduct
- Dress Code
- Attendance
- Nationals Advancement

I agree to abide by these standards and understand that if I do not comply with any or all of these, the Board of Directors has the right to remove me from the program.

Name of Athlete _____

Initials of Athlete _____

Name of Parent/Guardian _____

Signature of Parent/Guardian _____

Date Signed _____

We look forward to a great season!