



2012 SPRING FLAG FOOTBALL REGISTRATION

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REGISTRATION FEE - \$75

All player are eligible for the following discounts:
\$25 Referral Discount (must recruit one new player to NMS)

How did you hear about us?: _____

Were you referred by another player?_____ If so, who?_____

Athletes Legal Name (AS ON BIRTH CERTIFICATE)- One Athlete Per Form

(first, middle, last):_____

DOB:_____ Age on 2/1/12:_____

2011-2012 Grade:_____ 2011-2012 School:_____

HOME Address:_____

Returning NMS Player: Yes / No

Parent/Guardian Name:_____ Phone#:_____

Email:_____

Parent/Guardian Name:_____ Phone#:_____

Email:_____

***REFUND POLICY:** All refund requests must be made in writing to be official, and mailed to: North Manatee Storm, 6312 US HWY 301 N # 247, Ellenton FL 34222. E-mails will be acceptable. No refunds will be granted for requests received after February 1st. The date of the official postmark, or the date on the e-mail, is the refund request date. For refund requests not made in writing, the request is unofficial and the Treasurer of the North Manatee Storm will determine the official request date. There will be no refunds granted for requests received after February 1st, 2012. Registration fees are refundable if a child is registered in the program within the defined registration period, but NMS is unable to roster a child on a team. These circumstances can include but are not limited to the following: a child is wait-listed on a team due to the maximum number of players allowed per team or eligibility cannot be met as defined by National Pop Warner age and weight rules.

No refunds will be made until all issued equipment is turn in. No refund will be made if ineligibility is caused by disciplinary problems. Any granted refunds will be charged a \$25.00 administrative fee per participant. A participant not granted a refund may appeal to the executive board for a waiver of policy by writing a letter with an explanation and mailing it to the above address.

SIGNATURE:_____ DATE:_____

NMS Use Only:

_____Fee Paid _____Pop Warner Physical _____Picture

_____Participant Contract _____Email List Updated

Parent/Guardian Volunteer Assessment

(If registering siblings, complete assessment once)

Parent/Guardian #1 Name: _____

Employer: _____

Would you be interested coaching? Yes / No

Would you be interested in other volunteer positions? Yes / No

(Check all that apply)

____ Team Parent ____ Weigh Master ____ Equipment Committee

____ Field Committee ____ Concession Committee ____ PR/Comms Committee

____ Safety Committee ____ Scholastics Committee ____ Sponsorship Committee

____ Fundraising Committee ____ Special Events Committee

Other Volunteer Interests: _____

Parent/Guardian #2 Name: _____

Employer: _____

Would you be interested coaching? Yes / No

Would you be interested in other volunteer positions? Yes / No

(Check all that apply)

____ Team Parent ____ Weigh Master ____ Equipment Committee

____ Field Committee ____ Concession Committee ____ PR/Comms Committee

____ Safety Committee ____ Scholastics Committee ____ Sponsorship Committee

____ Fundraising Committee ____ Special Events Committee

Other Volunteer Interests: _____



Foundation for Youth Development, Inc
2012 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM
Spring Flag



Special Note: This form must be dated after January 1, 2012 and is applicable only for the 2012 season. This form must be submitted to your LOCAL Pop Warner organization prior to the athlete participating in Pop Warner. Every Pop Warner Association needs a fully completed and signed original of this form prior to allowing the athlete to participate.

Age Group: CUB (5-7) _____ Bobcat (8-10) _____ Wildcat (11-13) _____ Panther (14-16) _____
 Age group based on age as of February 1, 2012

Legal Name of Participant (must match birth certificate):

Last _____ First _____ Middle _____

Also known as _____

Address _____

City _____ State _____ Zipcode _____

Phone No: _____ Birth date _____

Gender: ___Male ___Female

Mailing Address if different from above:

City _____ State _____ Zip _____

Name of Parent/Guardian _____

Relationship to Athlete: _____

Address (if different from above) _____

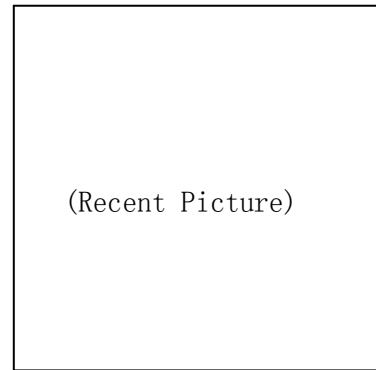
City _____ State _____ Zipcode _____

Telephone No: _____ Email Address: _____

Emergency Contact Information (if the parent/guardian can not be reached):

Name _____ Relationship to Athlete _____

Home Telephone No: _____ Cell or work No.: _____



1. PERMISSION TO PARTICIPATE

I, the parent/guardian of the above-named participant hereby acknowledge that my child is in good general health and I give my approval for my child to participate in any and all Pop Warner national, regional, league/conference, association and team/squad activities, including transportation to and from the activities by a licensed driver with proof of insurance.

2. INTENT TO INFORM

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 and/or dance 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, and therefore I do hereby waive, release, absolve, indemnify, and agree to hold harmless the local, league and regional Pop Warner organization(s), Pop Warner Little Scholars, Inc., and any and all organizers, sponsors, supervisors, participants, and persons transporting the above named participant to and from activities, from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.

3. EMERGENCY MEDICAL AUTHORIZATION

I hereby grant my permission for any and all emergency medical/dental treatment and/or first aid to be administered to my child/participant, including authorizing any medical treatment facility/hospital to administer emergency treatment, for any illness/injury/accident resulting from participation in any and all Pop Warner activities.

4. EQUIPMENT RESPONSIBILITY

I agree to assume full responsibility for any and all equipment/uniforms loaned to the above named participant and I agree to promptly return, upon request, the uniform and other equipment issued to the above named participant 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 the replacement cost of such equipment. I agree to furnish an authentic certified copy of a birth certificate of the above-named participant to local Pop Warner officials.

5. INSURANCE DISCLOSURE

I am aware that my local Pop Warner organization carries group accident insurance which is considered secondary or excess for medical purposes to any and all valid insurance I possess is considered primary insurance. Furthermore, I agree to notify in writing my head coach and local Pop Warner organization of any medical claim as a result of participation in Pop Warner as soon as reasonably possible. I understand that any registration fee paid does not constitute a direct premium for insurance and that a deductible(s) may apply.

6. SCHOLASTIC VERIFICATION

I hereby stipulate that either my child is scholastically fit, or that I have completed the scholastic eligibility form or the Home School Eligibility Form 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 local Pop Warner organization in order to comply with Pop Warner's scholastic fitness requirements.

7. FINANCIAL RESPONSIBILITY

I hereby stipulate that I have been advised by the local Pop Warner Organization of my rights, if any, to a refund in accordance with the local organization policies, and I have also been advised of my fundraising obligations for the entire season and agree to fully comply with those obligations.

8. COMMUNICATION CONSENT

As a condition to my child's participation in Pop Warner, I hereby consent to receive communications via email and mail from Pop Warner Little Scholars, Inc. and its partners. I understand that Pop Warner Little Scholars does not sell its contact lists and communications sent may contain program information as well as special offers and may be opted out of by following the instructions in the email or via written request to the Pop Warner National Office. Furthermore, I hereby grant to Pop Warner the absolute right and permission to make, reproduce, broadcast or otherwise use participant's name and likeness, any photograph, films, videos, recordings, or other depictions or images in whatever form or media in connection with participation in Pop Warner throughout the universe in perpetuity and in any and all advertising and promotion materials, in any manner or media whatsoever for purposes of art, advertising, editorial, trade or promotion or any other purpose whatsoever. To the extent that any benefit accrues or may accrue to Pop Warner, I hereby and forever waive any interest in or claim to such benefits and acknowledge that Pop Warner is under no obligation to exercise any rights granted herein.

9. ADULT CODE OF CONDUCT:

S1: In order to uphold the goals of Pop Warner and ensure that all participants have the benefit of a safe and fun learning environment, all parents, guardians and other adults and attendees of Pop Warner events, including but not limited to practices, competitions, and banquets, must behave accordingly in a respectful, courteous and sportsmanlike manner at all times.

S2: Any adult who is using alcohol, tobacco or non-prescription drugs and/or appears intoxicated at a Pop Warner event, and/or who is flagrantly rude, attempts to intimidate, verbally abuse, heckles, taunts, ridicules, boos, throws objects and/or uses vulgarity or profane language/gestures with an official, coach, volunteer, staff member, participant or other event attendee, must receive a verbal warning and/or be asked to leave a Pop Warner event. The member organization may also provide a written warning to the individual regarding the misbehavior. The adult's children may also be removed from the event. Any adult, who commits one of the above stated offenses a second time, will be banned from any and all Pop Warner events for a period of one year from the date of the second offense, and their children may also be removed from the program(s) for that time period.

S3: Any adult who physically assaults an official, coach, volunteer, staff member or participant or threatens grave bodily harm may be banned from any and all Pop Warner events for one year from the date of the offense, and their children may also be removed from any and all Pop Warner programs for that same period of time. After the ban has expired, if the individual commits another offense of the adult code of conduct, the individual will be permanently banned from any and all Pop Warner events and the individual's children may also be permanently removed from any and all Pop Warner programs.

10. I hereby understand and acknowledge that as a parent/guardian of a Pop Warner participant it is my responsibility to comply with all rules and regulations stipulated, adopted or recognized by Pop Warner Little Scholars Inc. or any of its member organizations and understand any non-compliance with any and all rules and regulations may be cause for discipline and/or dismissal of my child/the participant, myself, and/or any spectators or other persons affiliated with the undersigned and the above named participant. I further understand that the participant must meet Pop Warner age and/or weight requirements on their official certification date as established by Pop Warner Little Scholars, Inc. without exception and that the decision of the Weigh Master is final. I agree to furnish an authentic certified copy of a birth certificate of the above-named participant to local Pop Warner officials and understand that valid proof of age, a current year's signed medical release, Participant Contract and Parent Consent, and scholastic fitness must be presented by date of certification in order to participate further in Pop Warner activities.

11. DISPUTE RESOLUTION POLICY

I hereby understand and acknowledge that all civil disputes between Pop Warner and any and all affiliated parties will be subject to binding arbitration in the locale of the Pop Warner Little Scholars, Inc National Office in Langhorne, PA in accordance with Pennsylvania law under the guidelines and rules of the American Arbitration Association. I hereby agree that this binding arbitration shall be in lieu of any litigation by and between myself, Pop Warner and any and all affiliated parties. I also understand and agree that if I contest any decision or ruling of Pop Warner Little Scholars, Inc and seek other recourse, that I will reimburse Pop Warner for all legal fees and expenses it reasonably incurs. If any portion of this form shall be deemed unenforceable or invalid, the remainder shall remain in full force and effect.

By my signature below, I hereby stipulate that I have read, fully understand and voluntarily agree to all of the above:

Signature of Parent/Guardian _____

Print Full Legal Name _____

Signature of Participant _____

Print Full Legal Name _____

Date _____