

2022 NRYF&C Registration Document Checklist

Child's Name: _____

- ☐ Player ID Card
- ☐ Wallet Size Photo
- ☐ Birth Certificate (pull certified copy from 2019 book, if applicable)
- ☐ Physical Form – Section 1 & 2– **Section 2 MUST be filled out by the doctor– CAN NOT BE FAXED**
- ☐ Participant Contract & Parental Consent
- ☐ Family Agreement: Cheerleading
- ☐ Nationals Commitment Letter: Cheerleading
- ☐ June 2022 Report Card– *Log onto your parent portal to get a copy of the June report card*
- ☐ Uniform Contract
- ☐ Uniform Deposit Check: *Post Dated 9/1/22 & Made out to NRYFC*



POP WARNER LITTLE SCHOLARS, INC TEMPLATE ID CARD 2022 SEASON



PARTICIPANT INFORMATION <input type="checkbox"/> CHEER <input type="checkbox"/> DANCE <input type="checkbox"/> FOOTBALL <input type="checkbox"/> FLAG		ATTACH PHOTO HERE PHOTO MAY BE NO MORE THAN TWO YEARS OLD PHOTO MUST HAVE OVERLAPPING OFFICIAL SEAL
DIVISION OF PLAY (check one) <input type="checkbox"/> TM <input type="checkbox"/> MM <input type="checkbox"/> JPW <input type="checkbox"/> PW <input type="checkbox"/> JV <input type="checkbox"/> V <input type="checkbox"/> JB <input type="checkbox"/> B <input type="checkbox"/> UNLIMITED <input type="checkbox"/> CHALLENGER		
Weight at 1st Practice _____ <small>Last Name, First Name Middle Initial</small>		
Address (city, State, Zip Code)		
Home Phone	Work/Emergency Phone	
Association /League	Home Jersey Number & Color	Away Jersey Number & Color

LEAGUE CERTIFICATION OFFICIAL							
League Signature _____				Association Release _____			
DATE OF BIRTH	AGE AS OF 07/31	O/L	MEDICAL	CERTIFIED WEIGHT & DATE	CHEER CERTIFIED INSERT DATE	SCHOLASTICS	RECLASSIFIED DATE
TO THE BEST OF MY KNOWLEDGE AND BELIEF, I CERTIFY THAT THE INFORMATION ABOVE IS TRUE. SIGNATURE AND DATE OF CERTIFYING OFFICIAL:							

REGULAR SEASON	GAME DATE	WEIGH MASTER'S CERTIFICATION	(P) PASS (F) FAIL (D) DNW	POST SEASON	GAME DATE	WEIGH MASTER'S CERTIFICATION	(P) PASS (F) FAIL (D) DNW
FOOTBALL OR CHEER JAMBOREE			P F D	9 TH GAME CHEER INV. PLAY OFFS 1 ST ROUND			P F D
1 ST GAME			P F D	10 TH GAME PLAY OFFS 2 ND ROUND			P F D
2 ND GAME			P F D	PLAY OFFS 3 RD ROUND			P F D
3 RD GAME			P F D	LEAGUE FB CHAMPIONSHIP			P F D
4 TH GAME			P F D	LEAGUE SPIRIT CHAMPIONSHIP			P F D
5 TH GAME			P F D	REGIONAL SEMI-FINALS			P F D
6 TH GAME			P F D	REGIONAL SEMI-FINALS			P F D
7 TH GAME			P F D	REGIONAL CHAMPIONSHIP			P F D
8 TH GAME			P F D	NATIONAL CHAMPIONSHIP			P F D



Pop Warner Little Scholars, Inc.

2022 PHYSICAL FITNESS & MEDICAL HISTORY FORM



Special Note: This form is to be dated after January 1, 2022 and then submitted to your LOCAL Pop Warner organization. No other forms are acceptable. Section II must be completed in its entirety ONLY by a Licensed State Examiner (medical doctor, nurse practitioner, etc.). Section II is modified or substituted ONLY to comply with local and/or state laws or medical practitioner regulations (i.e. the medical practice insists on its own form). In either case, Section I must still be filled out entirely and attached to any modified/substituted form.

Section I: FOR PARENT/GUARDIAN COMPLETION ONLY

Legal Name of Participant (must match birth certificate):

Last _____ First _____ Middle _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone No: _____ Date of Birth: _____ Male _____ Female _____

Name of Primary Medical Insurance Company: _____ Policy Number: _____

Membership Number: _____ Name of Primary Insured: _____

Does primary insured have Medicaid? Yes No Does primary insured have Medicare? Yes No

Sport (check one): Cheer _____ Dance _____ Tackle _____ Flag _____

PARTICIPANT MEDICAL HISTORY

- | | | | |
|-----|---|-----|----|
| 1. | Are there any injuries requiring medical attention? | Yes | No |
| 2. | Are there any past surgeries or scheduled surgeries? | Yes | No |
| 3. | Is there any history of concussions and/or head injuries? | Yes | No |
| 4. | Is the participant currently under the care of a medical practitioner? | Yes | No |
| 5. | Is the participant currently taking any medications? | Yes | No |
| 6. | Does the participant have any allergies (penicillin, bee stings, etc)? | Yes | No |
| 7. | Does the participant have asthma/require the use of an inhaler? | Yes | No |
| 8. | Is the participant diabetic/require medication for diabetes? | Yes | No |
| 9. | Does the participant carry sickle cell trait/suffer from sickle cell disease? | Yes | No |
| 10. | Does the participant currently require medication? | Yes | No |
| 11. | Does/has the participant have/had seizures? | Yes | No |
| 12. | Does the participant wear glasses or contact lenses? | Yes | No |
| 13. | Does the participant wear a brace or other medical support device? | Yes | No |
| 14. | Does the participant have any other physical limitations or medical conditions? | Yes | No |

If you answered yes to any of the above questions, please provide the question number and an explanation in the following space and/or attach to this form:

If you answered yes about concussions, provide the name of the doctor or qualified medical professional who cleared Participant for this activity: _____

I certify that this information is accurate. I understand that this medical authorization may be voided in the event of injury, illness or accident and my child may not be cleared for participation at such time. Further, I acknowledge that it is my responsibility to inform my child's coach or organization official in writing if there is any change in the medical condition of my child. I also understand that it's my responsibility to obtain written permission from my child's physician on official medical stationary in order for my child to resume participation after any and all such injury, illness or accident.

Signature of Parent or Legal Guardian: _____

Print Name _____

Relationship to Participant _____

Dated _____



Pop Warner Little Scholars, Inc.
2022 PHYSICAL FITNESS & MEDICAL HISTORY FORM



Section II: THIS SECTION MUST BE COMPLETED INLY BY A LICENSED MEDICAL PROFESSIONAL ON OR AFTER JANUARY 1ST of the CURRENT CALENDAR YEAR.

Name of Participant: _____

(Please check the following if healthy or note otherwise):

Height	Weight	Eyes
Ears	Mouth	Nose & Throat
Respiratory	Cardiovascular	Neurological
Musculoskeletal	Dermatological	Blood Pressure

I hereby certify that I am a licensed state examiner and have examined the above named individual and understand that he/she will be participating in Pop Warner football, cheer or dance programs. I hereby attest that this individual is physically fit and has no medical condition which would prevent this individual from participating in Pop Warner activities for the 2022 season. I am therefore clearing this individual for athletic participation without limitation.

Please indicate medical profession (M.D., D.O. R.N., etc.) _____

Are you licensed in your state to perform physical examinations? YES NO

Today's Date: _____

Please sign and fill out the following information OR place Official Medical Practice Stamp here:

Signature _____ Printed Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax: _____

Email/Website: Email _____ (Optional)

Section II must be completed in its entirety ONLY by a Licensed State Examiner (medical doctor, nurse practitioner, etc. – this may vary by state). NO other forms are acceptable unless Section II is modified or substituted ONLY to comply with local and/or state laws OR because of medical practitioner regulations (i.e. the medical practice insists on its own form). In either case, Section I must still be filled out entirely and attached to any modified/substituted form that MUST be signed in the current calendar year.



Pop Warner Little Scholars, Inc.

2022 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM



Special Note: This form must be dated after January 1, 2022 and is APPLICABLE ONLY FOR THE 2022 SEASON.

This form must be submitted to your LOCAL organization before the athlete participates in Pop Warner. No other forms are acceptable. Every Pop Warner Association must have a fully completed and signed original of this form before allowing the athlete to participate.

Legal Name of Participant (must match birth certificate):

Last _____ First _____ Middle _____ Also known as _____

Address _____

City _____ State _____ Zip _____

Phone No: _____ Birth date _____ Gender: _____ Male _____ Female

Sport: _____ Football _____ Cheer _____ Dance _____ Flag _____ Parent/Guardian Birthday (mmddyyyy) _____

School: _____ Grade Level _____

Grade Point Average: _____ Alternative Form Participant: _____

(Must meet Scholastic Fitness Requirement of 2.0/70% or else fill out the Scholastic Eligibility Form or Home School Eligibility Form).

Mailing Address if different from above: _____

Name of Parent/Guardian _____ Relationship to Athlete: _____

Address (if different from above) _____

City _____ State _____ Zip _____

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.: _____

Pop Warner Official Use Only:

Registration Number: _____ Witnessed By: _____

Participant Fees

Amount Paid \$ _____

Type of Transaction: Proof of Cash _____ Check _____ Credit Card _____ Other (please explain) _____

Age verified? Yes _____ No _____

Birth Certificate _____ Other (please explain) _____

Division of Play (check one):

Traditional Divisions: Flag _____ Tiny Mite _____ Mitey Mite _____ Jr. Pee Wee _____ Pee Wee _____ Jr. Varsity _____ Varsity _____

Age-Based Division: 5-6 _____ 6-7 _____ 7-8 _____ 7-8-9 _____ 8-9-10 _____ 9-10-11 _____ 10-11-12 _____ 11-12-13 _____ 12-13-14 _____

Proof of Scholastic Fitness verified? Yes _____ No _____

2022 Parental/Guardian Permission and Waiver

Participant Name: _____

1. PERMISSION: I am the parent or legal guardian of the above-named participant. I acknowledge that my child is in good health. I give permission 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. I give permission for, and assume any and all risk of my child's use of various playing surfaces including natural and artificial grass, cheer mats, hard dirt, and under varying conditions, including, dry, wet and muddy, and I hereby understand that any surface may be regular or irregular.

2. RISK INFORMATION: I acknowledge the potential dangers of participation in any sport and I understand that participation in football, cheerleading and/or dance may result in **BODILY INJURY, PARALYSIS, BRAIN INJURY, PERMANENT DISABILITY AND/OR DEATH.** I acknowledge that protective equipment does not prevent all participant injuries. I release, indemnify, hold harmless and waive any claim against the coaches, local, league and regional Pop Warner organization(s), Pop Warner Little Scholars, Inc., and any and all organizers, sponsors, supervisors, participants, and persons transporting my child to and from activities, for any injury to my child whether the result of negligence or for any other cause.

3. EMERGENCY MEDICAL AUTHORIZATION: I give permission for emergency medical/dental treatment or first aid to be administered to my child for any illness/injury/accident resulting from participation in Pop Warner activities.

4. EQUIPMENT RESPONSIBILITY: I acknowledge my responsibility for any and all equipment/uniforms loaned to my child and I agree to promptly return, upon request, the uniform and other equipment in good condition except for normal wear and tear. If I fail to comply, I will be responsible for the cost of such equipment/uniform.

5. INSURANCE DISCLOSURE: I am aware that my local Pop Warner organization carries group accident medical insurance which is secondary or excess to my insurance which is considered primary insurance. Further, I agree to notify in writing my head coach and local Pop Warner organization of any medical claim from participation in Pop Warner as soon as reasonably possible. I understand that the registration fee is not premium for insurance and that deductibles may apply.

6. SCHOLASTIC FITNESS: I confirm that 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. Further, I authorize my child's school to release grades, report cards, and all other scholastic information to the local Pop Warner organization in order to comply with scholastic fitness requirements.

7. FINANCIAL RESPONSIBILITY: I acknowledge that my rights, if any, to a refund depends on the local Pop Warner 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. COMMUNICATIONS, PROMOTIONS, AND CONSENT: As a condition to my child's participation, I consent to receive communications by email and mail from Pop Warner Little Scholars, Inc. and its sponsors. I understand that Pop Warner Little Scholars does not sell its contact list. Communications may contain program information or special offers. I may "opt out" by instruction in the communication or by my written request to the Pop Warner National Office. Further, I grant Pop Warner the right and permission to make, reproduce, broadcast or otherwise use in perpetuity my child's name and likeness including photograph, films, videos, recordings, or other depictions or images in any form or media throughout the universe, for promotional material, advertising, editorial, trade or other purpose. To the extent that any benefit may accrue therefrom, I forever waive any interest in or claim to such benefit 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. ADHERENCE TO POP WARNER RULES AND PROCEDURES: I understand that it is my responsibility to comply with all rules and regulations of Pop Warner Little Scholars Inc and its affiliated organizations and understand that non-compliance may be cause for discipline and/or dismissal of my child, myself, and/or other persons affiliated with me or my child. I further understand that my child must meet Pop Warner age and/or weight requirements on their official certification date as established by Pop Warner without exception and that the decision of the Weigh Master is final. I agree to furnish an authentic certified copy of my child's birth certificate to local Pop Warner officials and understand that valid proof of age, a current calendar year's signed medical release, scholastic fitness form and this form must be presented by date of certification in order to participate in Pop Warner activities. I hereby hold Pop Warner harmless of any financial loss as the result of any disciplinary action.

11. DISPUTE RESOLUTION POLICY; SEVERABILITY: I understand and acknowledge that all disputes with Pop Warner and all affiliated parties will be subject to binding arbitration in Langhorne, PA in accordance with Pennsylvania law. I hereby agree that this binding arbitration shall be in lieu of any litigation. I also understand and agree that if I contest any decision or ruling of Pop Warner 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, the remainder shall remain in full force and effect.

In consideration of participation in Pop Warner activities and by my signature below, I confirm that I have read, fully understand and voluntarily agree to be bound by all of the above and that all information provided by me is true and accurate.

Signature of Parent/Guardian: _____ Print Full Legal Name _____

Signature of Participant: _____ Print Full Legal Name _____

Dated: 1/1/2022 PWLS, INC.

North Rockland Youth Football & Cheer 2022 Family Participation Agreement- Cheer

Commitment:

Cheerleading requires **commitment**. Each participant on the team is an asset. When one person is missing it negatively affects the **entire team**. Commitment to your team is expected from all participants. The cheerleading practice and game schedule must take precedence over your other sports/activities. A missed practice due to other activities will be considered an unexcused absence.

Initial here _____

Paperwork:

No child will be allowed to practice until ALL mandatory paperwork has been turned in – There will be no exceptions! In order for your child to participate you must provide a copy of birth certificate, recent photo, medical clearance form (provided by the league) and June 2022 report card on or before the first night of practice.

Initial here _____

Team Placement/ Athlete's Role:

Pop Warner guidelines determine which team(s) a participant is eligible for based on their age. North Rockland Youth Football & Cheer reserves the right to place athletes on teams as they see fit, within the Pop Warner guidelines. Once on a team, every athlete is expected to participate at the position that the coach determines they are best suited for. Coaches make these determinations based on what is most beneficial to the team as a whole. Athletes can be placed in any of the following positions: Flyer (go up in lifts), Base (hold lifts), Backspotter/Frontspotter (spot lifts), Tumbler, etc. as it is needed for the team!

Initial here _____

Practice:

All athletes must come to practice **prepared**. This means; appropriate practice attire, no jewelry, hair pulled back in a ponytail and bring a drink- preferably water. Athletes must be dropped off at practice on time and parents are expected to arrive 10 minutes before the end of each practice to pick up their child. Athletes who are not picked up on time will not be able to remain in the program. Head coaches will communicate the team's practice schedule as it becomes available. Practices will be held 2-3 times a week, for approximately 2 hours. North Rockland Youth Football & Cheer reserves the right to reduce or extend practice when needed, parents will be notified of those changes. Practice venues will vary based upon gym space availability within our community. Practice days, times, and locations are subject to change throughout the season, as this is out of our control.

Initial here _____

North Rockland Youth Football & Cheer 2022 Family Participation Agreement- Cheer

Cheerleading Season

August- *The cheerleading season begins August 1st.*

- Practices will begin the first week in August.

September- *Football Cheer begins in September.*

- All cheerleaders are expected to cheer at Football Games on Sunday's beginning in September (if we have affiliated football teams).
- Cheerleaders will begin learning their competition routine.

October- *Competition Season begins in October.*

- **Rockland County Cheer Showcase:**
 - All teams will participate in the Rockland County Cheer Showcase this month. All teams that place 1st, 2nd, and sometimes 3rd will advance to the Easter Region Championship.
 - Traditionally held locally
- **Empire State Classic Competition:**
 - NRYF&C reserves the right to determine which teams will participate in this competition. This will be communicated throughout the season.
 - This competition is usually held in upstate NY and the trip will incur expenses for each family, i.e. hotel, transportation depending on location.

November-

- **Easter Region Championship Competition:**
 - Only teams who advanced to this competition will participate.
 - All teams that place 1st, 2nd, and sometimes 3rd will automatically advance to the Pop Warner National Championship Competition.
 - Traditionally held in Trenton, NJ- this trip may require a mandatory hotel stay. Each family will incur their own expenses.

December-

- **Pop Warner National Championship:**
 - Only teams who advance to this competition will participate.
 - This competition is held at Universal Studios in Orlando, FL.
 - All participants and coaches must purchase the Pop Warner Nationals Package with a requirement that all expenses be paid upfront within a week of the Regional Victory. All expenses are your responsibility.

****Showcase Performances****

At any point throughout the competition season, NRYF&C reserves the right to have teams exhibition at a local High School competition.

Initial here _____

North Rockland Youth Football & Cheer 2022 Family Participation Agreement- Cheer

Football Cheer:

North Rockland Youth Football & Cheer is a program for both Football and Cheerleading. All cheerleaders are expected to cheer at Football Games come September. Games are played on Sundays. Games may be played as early as 8:00 a.m. and as late as 4:00 p.m. Parents are responsible for having their children there at least one half hour before game time and provide transportation home immediately following the game. **Attending all games is mandatory.** Cheerleaders are expected to cheer every Sunday at their football game. This includes the weeks following the County Competition. It will be determined that any girl who chooses to end her season after county competition and does not attend the additional games, has quit and she will be removed from the roster and will not be honored at the awards dinner.

In the event that NRYF&C does not have Football Teams, cheerleaders may have the opportunity to participate at High School Football Games, if permitted by the school district.

Competitive Cheer:

All competitive teams will collect an additional \$100 Competitive Fee per athlete in August. The competition season begins in October with the Rockland County Cheer Showcase. If teams place 1st, 2nd, or (sometimes) 3rd, they will continue to advance to the next Competition Level. The competition season has the potential to go until December if teams advance to Nationals in Orlando, FL. Several competitions will require a mandatory overnight stay, these expenses are your responsibility. For teams who qualify for Nationals, **all participants and coaches must purchase the Pop Warner Nationals Package with a requirement that all expenses be paid upfront within a week of the Regional Victory. These expenses are your responsibility.** The league will do their best, along with your participation, to fundraise in an attempt to defer any costs that may be incurred for the participant moving on to represent NR and the Eastern Region at Nationals.

Initial here _____

Uniforms:

All cheerleaders will receive one uniform. There is a \$250/300 (depending on style) uniform deposit collected at the beginning of the season. You will be held responsible for the condition of the uniform while your child has it. They are not to be dry-cleaned. You may write a check and we will hold the check as your deposit until the end of the season, however NRYF&C reserves the right to request a cash deposit for the use of a uniform that will be given back to you when the items are returned in good condition. Our expectation is that the uniform is washed & turned in clean at the end of the season, otherwise, a \$15.00 cleaning fee will be charged. In addition, you will be required to purchase cheer sneakers and a competition bow (approximate total of additional expenses – \$80-\$120).

Initial here _____

North Rockland Youth Football & Cheer 2022 Family Participation Agreement- Cheer

Volunteer Responsibilities:

Being a 100% volunteer organization, NRYF&C requires every family to donate their time to the Organization. Each family will be assigned a time slot to assist in the snack shack, at the fundraising table or any field related responsibilities.

Initial here _____

Adult Code of Conduct:

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. Additionally, all participants and parents MUST wait a minimum of 24 hours after a game before addressing issues with any coach or manager. This is done in an effort to allow for a “cooling” off period. The coach is NOT expected to speak with you prior to the 24 hour cooling off period.

Initial here _____

Absences and Tardiness:

A missed practice due to other sports/activities will be considered an unexcused absence. Missing practice without a phone call to a coach will be considered an unexcused absence. Unexcused absences from practice will result in the child not being able to participate at games.

Excused Absences Include: Doctor/Dentist Appointment with note*, Illness*, Funeral, School/Academic Functions, Major Family Functions* (Weddings, Christenings, etc.)

* Please Note: Three excused absences will equal one unexcused absence!

If a child has excessive absences, they will be removed from the team. This sport requires 100% commitment from all athletes on the team.

Initial here _____

Photo Consent/ Release:

I hereby agree that photographs taken of my child/children while participating in North Rockland Youth Football & Cheer activities may be used by NRYF&C for use in their website and/or publications related to NRYF&C.

Initial here _____

North Rockland Youth Football & Cheer 2022 Family Participation Agreement- Cheer

Fundraising:

North Rockland Youth Football & Cheer is a non-profit 501(c)(3) and as such must follow guidelines established by the IRS. While we collect a registration fee that covers the better part of our expenses, it is necessary to raise funds to keep our organization vibrant, healthy and moving forward. Throughout the season, fundraisers will be offered, and it is our expectation that **all** families will participate in each fundraiser.

- Fifty percent of all funds raised will go to the administrative costs of the league. This money will be used to offset registration loss and equipment purchases for both football and cheer.
- Fifty percent of all funds raised will go towards those that advance to Nationals, whether they are football or cheer. This board feels it is appropriate to assist those that have brought honor to our association in representing NRYF&C at the National level. In the event that no team travels to Nationals, these monies will be placed in the general fund and used to sustain NRYF&C for the future.

****Reimbursement for Nationals will be based on individual participation in each fundraiser.**

Initial here_____

And Now a Word From the Coaches...

Since cheerleading does not have a "second string", we ask that your child attend all practices and games. It is common courtesy to come prepared to all events and not to be late. These rules and expectations are for the "good of the team". While we understand that sometimes extenuating circumstances do occur, please keep in mind that your child's absence impacts the entire team. Please remember, cheerleading is a "SPORT". We hope that all of our athletes will give 100% each and every day! We in turn will do our best for your children! We want to foster an environment where our athletes learn the true meaning of "TEAMWORK" and realize that there is nothing they cannot do. Together we can accomplish anything!

I have read this Family Participation Agreement with my child. We agree to support the expectations and abide by the conditions described herein.

Child's Name: _____

Parent's Signature: _____

Date: _____

North Rockland Youth Football & Cheer 2022 Nationals Commitment Letter- Cheer

Goal: Nationals

Destination: Universal Studios, Orlando, Florida

The goal of NRYF&C is to bring out the very best in our athletes and to motivate them to achieve the highest success they can within a season. We want to foster an environment where our athletes learn the true meaning of "TEAMWORK" and realize that there is nothing they cannot accomplish.

Placing 1st, 2nd and sometimes 3rd at the Eastern Regional Championships will automatically send your team to Nationals in December to compete at Universal Studios in Orlando, Florida. Furthermore, **ALL** Level 4 teams receive an automatic bid to Nationals. **All participants and coaches must purchase the Pop Warner package with a requirement that all expenses be paid upfront within a week of the victory. All expenses listed above are your responsibility.**

The league will do their best along with your participation and best efforts to fundraise in an attempt to defer any costs that may be incurred for the athlete moving on to represent North Rockland and the Eastern Region at Nationals.

Please keep in mind that your child's absence from attending Nationals impacts the entire team and that these rules and expectations are in the best interest of the TEAM.

The expectation of NRYF&C, its coaching volunteers and the team is that both you the Parent/Guardian and your child understand upfront the expectation that your child completes the entire season through Nationals.

Participant's Name: _____

Parent/Guardian Signature: _____ Date ____/____/____

North Rockland Youth Football & Cheer

2022 Cheer Uniform Contract

- The uniform you are receiving is the property of North Rockland Youth Football & Cheer.
- No alterations or adjustments can be made to the uniform unless granted permission.
- Please wash it according to the instructions on the tag.
- A deposit check made out to NRYF&C is required to receive the uniform:
 - \$250 for Tiny Mites & Mitey Mites
 - \$300 for JPW, PW, JV, & V teams.
- NRYF&C reserves the right to request the deposit in cash.
- The uniform must be returned at the end of the season on the designated date to be announced toward the end of the season.
- All uniforms must be returned washed and in a plastic zip lock bag with your child's name on it.
- Once your uniform is returned, you will receive your deposit check back. If the uniform is damaged or not returned, your deposit check will be cashed.
- If your uniform is not returned clean, as determined by NRYF&C, you will be assessed a \$15 cleaning fee payable in cash only.
- You will be responsible for purchasing a Competition Bow, which may be used for more than one season. If the bow gets lost, you will be responsible for replacing it.

I agree to the above

(Parent's signature)

Child's Name

Child's Team