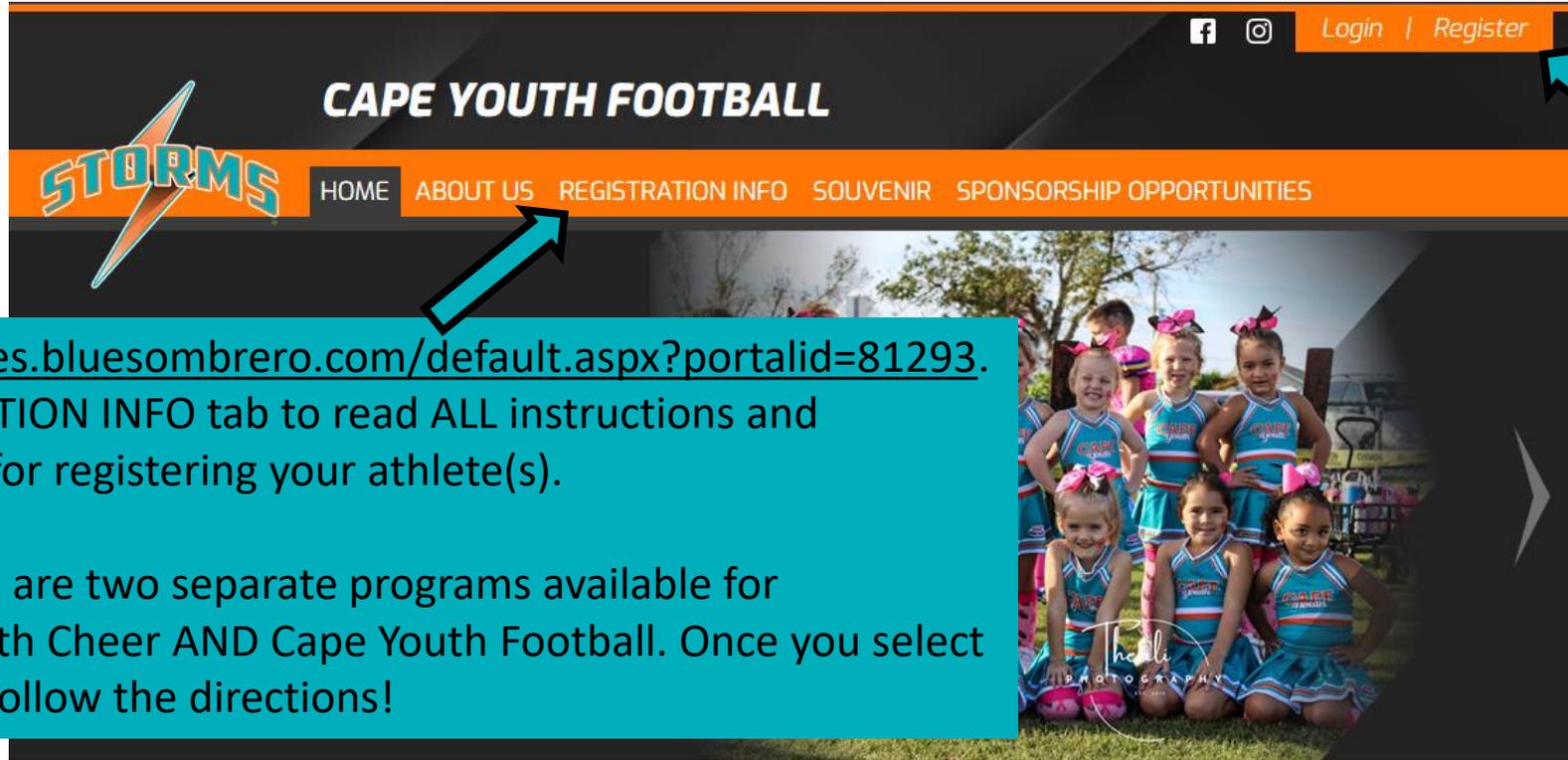




**2025
Online
Registration
Guide**

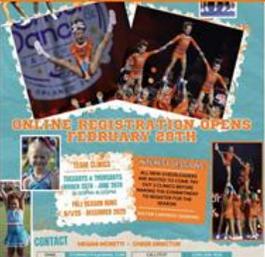
Step 1 – Accessing our Website



Click here to create an account as shown in step 1 on the Registration Page. If you already have an account, click “login” instead.

Click on <https://leagues.bluesombrero.com/default.aspx?portalid=81293>. Click on the REGISTRATION INFO tab to read ALL instructions and information required for registering your athlete(s).

Please note that there are two separate programs available for registration: Cape Youth Cheer AND Cape Youth Football. Once you select the correct program, follow the directions!

<p>FALL CHEER SIGN-UPS</p>  <p>Read More ▶</p>	<p>SPRING FOOTBALL SIGN-UPS</p>  <p>Read More ▶</p>	<p>FEDERAL ELECTRIC SPONSOR</p>  <p>Read More ▶</p>
--	---	---

Step 2 – Create Your Registration Account

Steps 2a-2d are for NEW account registrations. If you already have an account, please skip to Step 3!

This CONFIRMS the Pop Warner Association you are registering with for FALL 2025. Be sure this says “Cape Youth Football Association” in the welcome window.



The screenshot shows the registration interface for Sports Connect, powered by stack sports. The header features the Sports Connect logo and the text "powered by stack sports". The main content area is titled "Cape Youth Football Association" and includes a welcome message: "Welcome! Please enter your email address to get started." Below this is an "Email Address" input field and a blue "Continue" button. At the bottom of the form, there are two "KID SAFE" logos. A large teal arrow points from the left text box to the "Cape Youth Football Association" title, and another teal arrow points from the right text box to the "Continue" button.

You will need to create your account with an email and password. Make sure to write this information down for future use.

Step 2a – Create Your Registration Account

Steps 2a-2d are for **NEW** account registrations. If you already have an account, **please skip to Step 3!**

CAPE YOUTH FOOTBALL ASSOCIATION



What would you like to do today?

Welcome! Thanks for creating an account for Cape Youth Football Association! Get started by selecting an option below.



Register My Players

Select this option if you are a parent/guardian registering your kids.



Register Myself

Select this option to register yourself as Team Staff / Volunteer, form your own team and invite players, or register yourself as a player or member for organizations offering adult registration.

Click “Register My Players” to add your athlete(s) name(s) to begin the registration process!

Step 2b – Create Your Registration Account

Steps 2a-2d are for **NEW** account registrations. If you already have an account, **please skip to Step 3!**

CAPE YOUTH FOOTBALL ASSOCIATION  

Okay, let's get to know you first.

Before we begin adding your kids to your account, we need to collect a few pieces of information from you, the account holder.

Account Holder Information



Upload Profile Picture

Contact Information

This is where you fill out all of the necessary information about yourself, the **PARENT/GUARDIAN!**

Step 2c – Create Your Registration Account

Steps 2a-2d are for **NEW** account registrations. If you already have an account, **please skip to Step 3!**

This is where you choose how many athletes will be attached to your profile. Choose the number of children in your home that you are registering for sports!

CAPE YOUTH FOOTBALL ASSOCIATION



Nice to meet you Ashley, how many kids are you registering today?

Feel free to include all your kids here. Many sports organizations have programs for all ages.

1  3 4 5 +

Great, 2 players! What are their legal first names?

Player 1 Legal First Name *

Player 2 Legal First Name *

< Back

Add names for your athlete(s) and then click “continue”.

Continue



Step 2d – Create Your Registration Account

Steps 2a-2d are for **NEW** account registrations. If you already have an account, **please skip to Step 3!**

This is where you add your children to your **PROFILE**. This is **NOT** the registration information!

Got it, now let's get Brantley's info

It's important that you enter the legal first name & last name

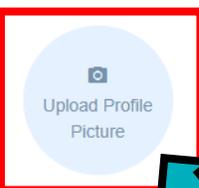
You **MUST** enter your athlete(s) **LEGAL NAME**. No Nicknames.

registered in the right program.

Player Information

Legal First Name *

Legal Last Name *



Gender *

Date of Birth *

Player Picture must be **FULL FACE** without any sunglasses, hats, silly faces, etc. You **MUST** take the photo on a white wall as the background.

Address Information

Same as primary account Yes

Street *

City *

State *
Florida

ZIP *

< Back

Save

Answer required information for your athlete(s) and then click "save" to move to the next athlete (if applicable). When complete, click "continue".

Photo Examples



THIS IS CORRECT!



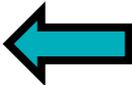
THIS IS NOT ACCEPTABLE!

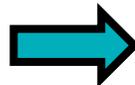
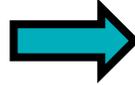
Step 3 – Pick Your Division: Cheer or Football

CAPE YOUTH FOOTBALL ASSOCIATION  

Here are the available activities for your players

Please select any activities you would like to register your kids in. Available activities are based on age and gender and configured by Cape Youth Football Association.

 Available programs for Brantley 

-  2025 CYFA Football  [View Divisions](#)
-  2025 CYFA Cheer  [View Divisions](#)

[View More](#) [Skip](#)

Choose the correct program for your athlete: Cheer or Football.
Click “View Divisions” to move to the next step. Be sure to do this for EACH of your athletes!

Step 4 – Confirm Your Team Selection

 Available programs for Brantley

1  2025 CYFA Football

Cape Youth Storms 9U FB

Season Dates: 07/15/2025 - 10/25/2025
Registration Close Date: 03/23/2025

\$350



Select

2  2025 CYFA Cheer

Cape Youth Storms MM - 7-9 yr olds - competitive

Season Dates: 03/25/2025 - 12/16/2025
Registration Close Date: 12/16/2025

\$400



Select

[< Back](#) [Continue](#)

Select the team to which you wish your child to be registered. **PLEASE NOTE:** The Cheer and Football Coordinators will make the final determination on which team your athlete(s) will be rostered. This selection allows us to see your preferences which will help in our decision making.

The "Select" bar will turn white and say "Selected" once you have made a selection. Click "Next Player" or "Continue" to continue after making your selection.

You must follow the same steps for each athlete you are registering before moving on to the next step!



Step 5 – Required Information – Part 1

Please fill out the program questions below

The following information is requested by your organization for enrollment. Please ensure that Legal First name and Legal Last name are entered below.

Fundraising Fee (Candy Bar Field Fundraiser) *

I Accept



At the **TOP** of the Program Questions page, you'll need to click "I Accept" to acknowledge the Field Fundraising Candy Bar Fee. This \$60.00 fee is **FULLY REFUNDABLE** once you sell your box of candy at \$2 per bar.

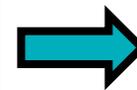
Refundable Volunteer Fee (Refundable Volunteer Fee) *

I Accept



You will also see a Refundable Volunteer Fee. This is a \$60.00 Fee that is **FULLY REFUNDABLE AFTER** volunteering in the Concession Stand, Chain Crew or as Opposing Sidelines MPR Observer (*Football Only*) 3 times!

At the **BOTTOM** of the Program Questions page, you'll need to click "I Accept" to acknowledge the QwikCut Fee. This \$10.00 fee will give you **FULL** access to our online Game Film Website to be able to rewatch any Game throughout the season.



QwikCut Fee (QwikCut Fee) *

I Accept

THIS FEE ONLY APPLIES TO FOOTBALL

****You will see this fee under the "Breakdown" section of the Order Summary as shown in Step 13.**

Step 6 – Required Information – Part 2

PLEASE NOTE: You will have to do this for **EVERY ATHLETE** you're registering!

Legal First Name *

Legal Last Name *

Upload Profile Picture

Gender *

Date of Birth

Birth Certificate Document verified

2025 CYFA Football

Parent 1 Family Role * **This is PRIMARY CONTACT**

Parent 2 First Name * **This is SECONDARY CONTACT**

Parent 2 Last Name *

Parent 2 Family Role

Parent 2 Email Address

Parent 2 Mobile Phone

Medical Doctor Signature Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

Player Contract Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

Report Card or Proof of Scholastic Fitness Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

Report Card 2 Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

If **NEW** – Upload the **ORIGINAL CLEAR IN COLOR** Picture of Birth Certificate **HERE**
If **RETURNER** – It will say “Document Verified”

This will be done **DIGITALLY** at the end

This will be done **DIGITALLY** at the end

This will be emailed to scholastics.capeyouth@gmail.com once end of year report cards are released

Step 7 – Required Information – Part 3

PLEASE NOTE: You will have to do this for **EVERY ATHLETE** you're registering!

Secondary Contact Last Name * <input type="text" value="Enter Answer"/> This is EMERGENCY CONTACT <small>0 / 40</small>	Secondary Contact First Name * <input type="text" value="Enter Answer"/> <small>0 / 40</small>
Secondary Contact Mobile Phone Number * <input type="text" value="Enter Answer"/> <small>0 / 40</small>	Secondary Contact Alternate Phone Number * <input type="text" value="Enter Answer"/> <small>0 / 40</small>
Secondary Contact Email * <input type="text" value="Enter Answer"/> <small>0 / 40</small>	Name of Primary Medical Insurance Company * <input type="text" value="Enter Answer"/> <small>0 / 40</small>
Policy Number * <input type="text" value="Enter Answer"/> <small>0 / 40</small>	Does primary insured have Medicaid? * <input type="radio"/> Yes <input type="radio"/> No
Does primary insured have Medicare? * <input type="radio"/> Yes <input type="radio"/> No	Family Doctor Name * <input type="text" value="Enter Answer"/> <small>0 / 40</small>
Doctor Phone No: * <input type="text" value="Enter Answer"/> <small>0 / 40</small>	Please identify and elaborate on any medical conditions which we should be aware of (if none, write none): * <input type="text" value="Enter Answer"/> <small>0 / 40</small>
Please list any medications currently being taken (If none, write none): * <input type="text" value="Enter Answer"/> <small>0 / 40</small>	In the past 24 months, has the participant been tested, diagnosed and/or treated for a concussion? * <input type="radio"/> Yes <input type="radio"/> No
If yes, provide the specific date and detail on the diagnoses/treatment and the outcome: * <input type="text" value="Enter Answer"/> <small>0 / 40</small>	List any known allergies (if none, write none): * <input type="text" value="Enter Answer"/> <small>0 / 40</small>

Policy Number. If you **DO NOT** have a policy, type "None".

Insurance Information. If you **DO NOT** have insurance, type "None".

IMPORTANT – Please list ANY medical issues. If there are none, type "None".

List any medications. If your child is **NOT** currently taking any, type "None".

IMPORTANT – If there have been any concussions we **MUST KNOW!**

IMPORTANT – Please list ANY allergies (especially to medications). If there are none, type "None".

Step 8 – Required Information – Part 4

PLEASE NOTE: You will have to do this for **EVERY ATHLETE** you're registering!

If Booster has been given, list the date. If it **HAS NOT**, type "None".



Date of last Tetanus Toxoid Booster: *

0 / 40

GPA Score

0 / 40

Weight

0 / 40



IMPORTANT – Please leave blank; **DO NOT** fill this section out



IMPORTANT – Please leave blank; **DO NOT** fill this section out

Step 9 – Required Information – Part 5

PLEASE NOTE: You will have to do this for **EVERY ATHLETE** you're registering!

Within the Registration Questions you will be asked to accept the below acknowledgements

2025 YOUTH PARTICIPANT MEDICAL HISTORY FORM *

View / Accept

Click on
"View/Accept". It
will pull up the
document on the
right.

Click on the small box
saying "I accept the
Electronic Legal
Agreement" then type
YOUR First and Last Name.
NOT your child's. Then
click "I Accept".

2025 YOUTH PARTICIPANT MEDICAL HISTORY FORM

Section VI: PARENT/GUARDIAN CONSENT AND MEDICAL RELEASE

Recognizing the possibility of serious injury, illness or death, and in consideration for Pop Warner Little Scholars, Inc. and its members accepting my child as a participant in its official programs, I consent to my child participating in Pop Warner tackle football, flag football, cheer and / or dance. Further, I hereby release, discharge, and otherwise indemnify Pop Warner, its member organizations and sponsors, their employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the Programs, against any claim by or on behalf of my child as a result of participating in the Pop Warner programs.

My child has received a physical examination by a licensed health care provider within the past two years and has been found physically capable of participating in the sport of football and/or cheerleading & dance. I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child's participation in the programs. I give my consent to have an athletic trainer and/or licensed health care provider, including a medical doctor or dentist, provide my child with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.

I accept the Electronic Legal Agreement

First Name *

Last Name *

I Accept

Step 10 – Required Information – Part 6

PLEASE NOTE: You will have to do this for **EVERY ATHLETE** you're registering!

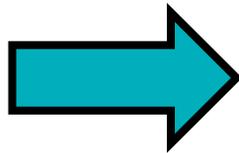
Within the Registration Questions you will be asked to accept the below acknowledgements

2025-2026 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM *

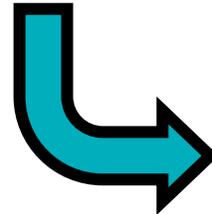
View / Accept



Click on "View/Accept". It will pull up the document on the right.



Click on the small box saying "I accept the Electronic Legal Agreement" then type YOUR First and Last Name. **NOT** your child's. Then click "I Accept".



2025-2026 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM

11. Publicly criticizing or making derogatory statements of an official, opposing teams, event personnel or its policies, or other individuals associated with the event. This includes comments with respect to their conduct, character, competence, integrity or appearance. Note: social media is deemed a public forum.
12. Failing to follow instructions of event personnel.
13. Any behavior which otherwise violates conduct codes set by partner venues, hotels or ancillary venues including but not limited to theme parks, as enforced by those properties.

Failure to abide by these expectations are grounds for removal from competition. Pop Warner reserves the right to remove individuals or the entire team. Depending on the infraction, a one-year ban from Pop Warner events and programs will be considered. A repeat offense of the same infraction may result in a permanent ban. All removals will be without refund.

Section VI: PARENT/GUARDIAN AUTHORIZATION

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.

I accept the Electronic Legal Agreement

First Name *

Last Name *

I Accept

Step 11 – Required Information – Part 7

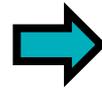
Within the Registration Questions you will be asked to accept the below acknowledgements

This question will be required for Football **AND** Cheer.



Report Cards *

View / Accept



Report Cards

I acknowledge that I will email my athlete's 2024-2025 end of year report card when it's available in June to scholastics.capeyouth@gmail.com

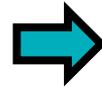
I Accept

This question will be required for **Cheer ONLY**.



Competition Fee Acknowledgment *

View / Accept



Competition Fee Acknowledgment

Approximate Competition Fee Breakdown (not included in Registration Fees):

- Regionals (due in October)
- \$160.00
- Nationals (due in November)
- \$800.00

**Fundraising opportunities available throughout the Fall Season.

***Competition Fees DO NOT apply to Junior Tiny Mites (3-4 Year olds).

!!!COMPETITION FEES ARE SUBJECT TO CHANGE!!!

By accepting this you are acknowledging that additional fees will be required for your cheerleader to participate in Competitions.

I Accept

This question will be required for **Cheer ONLY**. Since we are opening Fall Football Registration at a later date this helps us keep track of the Sibling Discounts that will need to be applied to your account.



Will you be registering a Football Player when fall registration opens at a later date? If so, please provide their name below. If no, please type no. *

Enter Answer

Step 12 – Volunteer Opportunities

Steps 12 – 12b are for anyone who would like to Volunteer for a Team. If you **DO NOT** want to Volunteer on a Team, please skip to Step 10!



2025 CYFA Cheer

Cape Youth Storms CH JTM (Emma is registered here)

Select which position you are interested in Volunteering for.

Head Coach

Head Coach

Select

Assistant Coach

Assistant Coach

Select

Team Mom

Select

Junior Coach

Select



2025 CYFA Football

Cape Youth Storms 6U FB (Grayson is registered here)

Once you click “Select”, it will ask if you would like to sign up as you or a new user.

Assistant Coach

Assistant Coach

Select

Team Mom

Who would you like to sign up for this role?



Sign up Ashley



Sign up a new user

Junior Coach

Junior Coach

Select

Head Coach

Head Coach

Select

After you make a selection, scroll to the bottom and click “Continue”.

Step 12a – Volunteer Opportunities

Steps 12 – 12b are for anyone who would like to Volunteer for a Team. If you **DO NOT** want to Volunteer on a Team, **please skip to Step 10!**

You've selected the following opportunity:



It will show you the team and position you selected for volunteering at the top of the page.

Contact Information

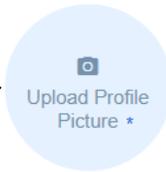
Enter your **LEGAL** Name as it appears on your Drivers License.

Legal First Name *

Middle Name

Legal Last Name *

Email Address



Volunteer Picture must be **FULL FACE** without any sunglasses, hats, silly faces, etc. You **MUST** take the photo on a white wall as the background.

Date of Birth *

Gender *

Street *

City *

State *

ZIP *

Home Phone

Cell Phone *

Enter your Date of Birth, Gender, Home Address, and Cell Phone Number.

Step 12b – Volunteer Opportunities

Steps 12 – 12b are for anyone who would like to Volunteer for a Team. If you **DO NOT** want to Volunteer on a Team, **please skip to Step 10!**

Proof of Identification

Driver's License Number *

Driver's License State Issued *

Driver's License Expiration Date *



Additional Information

We need a little more information for the following roles you've selected.



2025 CYFA Football
Cape Youth Storms 6U FB
Team Mom

+ CPR Certification

Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

+ Pop Warner Skill Progression Checklist

Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

+ YCADA Certification or USA Football Certification

Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

+ Picture of Driver's License *

Only .doc, .xls, .jpeg, .txt, .docx, .xlsx, .png, .pdf, .jpg, .gif files allowed. Max file size 10MB

As you complete your certifications you will need to log back in and upload them here. This applies for Coaches and Team Moms. If you are already CPR Certified you can upload that here as well, this is **NOT** required for everyone.

+ Pop Warner Head Coach Declaration Checklist

Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

+ Additional Certification

Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

+ SafeSport

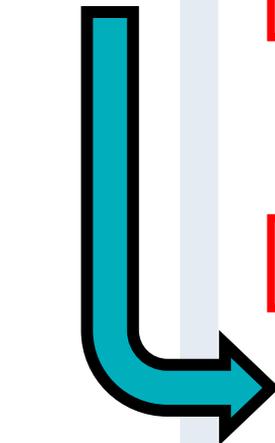
Only .png, .jpg, .pdf, .jpeg, .gif files allowed. Max file size 10MB

< Back

Once you have entered in all of your information and uploaded your Driver's License click "Continue"

Continue

Enter your Driver's License Information **AND** upload a picture of the **FRONT** of your License.



Step 13 – Order Summary – Part 1

Here is your order summary.

Let's review your order and payment options before checking out. For your security, if you are inactive on this page for 20 minutes you'll automatically be logged out and will have to log back in to complete your order.

Here is where it will show you the breakdown of cost. If you are registering multiple athletes the system will split the "Candy Bar Field Fundraiser" and "Refundable Volunteer Fee" between all athletes, but you are still **ONLY** paying the \$60 fee **ONCE**.



Brantley

2025 CYFA Football - Cape Youth Storms 8U FB

Hide Breakdown ^

Division Price	\$350.00
Candy Bar Field Fundraiser	+\$30.00
Refundable Volunteer Fee	+\$30.00
QwikCut Fee	+\$10.00
Subtotal	\$420.00

Custom Deposit

\$

+ Payment Options*



If your athlete(s) are 6U and above it will give you "Payment Options".



Emma

2025 CYFA Cheer - Cape Youth Storms TM - 5-7 yr olds - competitive

Hide Breakdown ^

Division Price	\$300.00
Candy Bar Field Fundraiser	+\$30.00
Refundable Volunteer Fee	+\$30.00
2nd Player Family Discount - Site	-\$25.00
Subtotal	\$335.00

Custom Deposit

\$

Pay in Full



If your athlete(s) are 6U and above it will show you the sibling discount under the second athlete and so on.



If your athlete is on Jr Tiny Mites it will give you "Pay In Full" due to discounted rate. (pricing on the left does not reflect the cost of Jr. Tiny Mites)

Step 14 – Order Summary – Part 2

Click “Payment Options” to view all available options. You are able to Pay In Full or Payment Plans.

If you choose Payment Plans the amount due at time of Registration will be a \$70.00 deposit with the \$60 Candy Bar Field Fundraiser, the \$60 Refundable Volunteer Fee, and the \$10 QwikCut Fee *(per athlete for football ONLY)* totaling \$190.00 *(For Cheer)* or \$200.00 *(for Football)* due today.

Once you have made your selection on Payment Options click “Select”. Then “Continue” at the bottom of the page.

Payment Options

Pay in Full Payment Plans

If you choose the “Payment Plan” option you will be charged a \$3.00 service fee **EACH** time you make a payment.

Football Payment Plan

Payment Date	Installment Amount	Fees / Discounts	Payment Total
Due Today	\$70.00	\$73.00	\$143.00
04/28/25	\$93.34	\$3.00	\$96.34
05/28/25	\$93.33	\$3.00	\$96.33
06/28/25	\$93.33	\$3.00	\$96.33

Select

Payment Options

Pay in Full Payment Plans

Pay in Full

Payment Date	Payment Amount	Remaining Balance
Due Today	\$335.00	\$0

Select

Step 15 – Order Summary – Part 3

Registration Insurance is **NOT** a **REQUIRED** purchase. This is completely up to you as the Parent/Guardian.

Prices will vary per athlete. If you choose to purchase please make sure to click each box.



Either option must be clicked to move onto Gap Medical Insurance.



REGISTRATION INSURANCE

Protect Your Registration

Add registration cancellation & interruption protection and you may be reimbursed for the cost of your non-refundable, unused registration fees.

Add registration cancellation & interruption plans for

 Sickness & Injury

 Natural Disasters

 Common Carrier Disruptions

 Inclement Weather

 Strikes & Civil Disorder

 Many Other Covered Reasons

Brantley - Eligible Programs 1

2025 CYFA Football-Cape Youth Storms 9U FB \$25.90

Emma - Eligible Programs 1

2025 CYFA Cheer-Cape Youth Storms TM - 5-7 yr olds - competitive \$22.20

Selecting "Protect my registration" constitutes my electronic signature. I confirm that I have read, understand and agree to the [policy terms and conditions](#), and [important notices and disclosures](#), which includes fraud warnings, privacy notices, and consent to electronic signature and delivery.

Yes, protect my registration

No, do not protect my registration

Step 16 – Order Summary – Part 4

Gap Medical Insurance is **NOT** a **REQUIRED** purchase. This is completely up to you as the Parent/Guardian.

(We are required to carry insurance at the field for each participant that is rostered for our organization; if you choose to purchase Gap Medical Insurance please make sure to click “Learn More” prior to purchasing.)

Prices will vary per athlete. If you choose to purchase please make sure to click each box.

Either option must be clicked to move onto Payment Method.

GAP MEDICAL INSURANCE

Accident Medical Coverage

Get up to \$5,000 reimbursed for out-of-pocket medical costs resulting from injuries that occur during the registered activity - no deductible, no copays. Covers injuries during practices and games, all for a one-time fee. [Learn More.](#)

Add accidental medical coverage for

- ✓ Reimburses up to \$5,000 of out-of-pocket medical costs
- ✓ Pays for your deductible and copays on approved claims
- ✓ One-time fee includes any injuries that occur during the registered activity
- ✓ Covers injuries that occur during practices or games

Brantley - Eligible Programs 1

2025 CYFA Football-Cape Youth Storms 9U FB \$36.75

Emma - Eligible Programs 1

2025 CYFA Cheer-Cape Youth Storms TM - 5-7 yr olds - competitive \$21.66

Accepting coverage constitutes my electronic signature. I confirm that I have read, understand, and agree to the [insurance notices and disclosures.](#)

Yes, I would like to add Gap Medical

No, I chose not to add Gap Medical

Step 17 – Payment Information

PAYMENT METHOD

User has not paid. Leave as an open balance.

DO NOT CHECK THIS BOX! If you do your player will not be added to the roster until we receive payment.

Payment Method *

Required

Choose Credit Card to pay. We will **NOT** accept check payments for this option!

This is where you put in your personal payment information.

BILLING ADDRESS

Is the billing address the same as the primary account holder's address? Yes

First Name

Last Name

Street

Unit

City

State

ZIP Code

Click "I Agree to the Terms and Conditions", then Submit Order.

Send Email Confirmation

I Agree to the **Terms and Conditions** *

Submit Order

Step 15 – Order Submissions Confirmation Page

This is your confirmation that you have finished registration!

CAPE YOUTH FOOTBALL ASSOCIATION

Congratulations! Your order has been submitted!

Thanks, Ashley,
Your order has been successfully placed. Your Registration Order Confirmation Number is

 **Payment Method**

Your credit card ending in . You will see a charge on your credit card statement from **Cape Youth Football Association** .

Open Balance

Total Open Balance: \$0.00



If you chose to do a payment plan your remaining open balance will show here.

THANK YOU FOR BECOMING PART OF OUR CAPE YOUTH FAMILY!



❖ ***DON'T FORGET...***

- ❖ Report Card **MUST** be uploaded at the end of the 2024-2025 school year! In June, when the final report card is available showing **ALL** 4 quarters, you **MUST** email it in its **ENTIRETY!** This will need to be uploaded by July 1, 2025. Please know your access to your FOCUS accounts or what ever your school provides to check your athlete's grades.
- ❖ Athletes **WILL NOT** be placed on the official roster until **ALL BALANCES ARE PAID IN FULL!** The deposit will hold their spot, if all balances are **NOT** paid by June 28th your athlete will be removed from the roster.
- ❖ Please make sure to read through your confirmation email about the Athlete Drop timeline.
- ❖ Please follow us on our Cape Youth Facebook page for the most up to date information!