

Association of Christian Youth Sports

Player Registration & Medical Release Form

Registrant: Please fill-out and/or sign appropriate boxed areas. To comply with FYSA requirements each new player is asked to provide a **photocopy (No Originals)** of their **Official State Issued Birth Certificate, Passport** or **write in their FYSA pass #** below. Please attach copies to back of this form. Thank you.

Player Information Please Print Neatly ☺		FYSA player pass # _____ <small>If available</small>	
Do you live within the Orlando City Limits? Yes <input type="checkbox"/> No <input type="checkbox"/>		Does player receive free or reduced lunch? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Last Name: _____		First Name: _____	
Street Address: _____		Home Phone : (____) _____	
City: _____		State: <u>FL</u> Zip: _____	
		M <input type="checkbox"/> F <input type="checkbox"/> Gender	
E-Mail: _____		Age _____ D.O.B: _____	
		Shirt _____ Short _____ Grade _____	
Team Name: _____		School Attending: _____	
Father/Guardian: _____		Mother / Guardian: _____	
<small>Name</small>		<small>Name</small>	
<small>Work or Cell phone</small>		<small>Work or Cell phone</small>	
If possible, please try to put my child on a team with _____			
		<small>Name</small>	
		<small>Phone</small>	
Method of payment: Cash <input type="checkbox"/> Amount \$ _____ Check <input type="checkbox"/> # _____			

Volunteer Sign-up

Organizations like ACYS exist because many good people like you make a quality decision to volunteer their time and effort to making something positive happen. How can you help? Please check one or more. Thanks!

- | | | | |
|---|---|---|--|
| <i>Head Coach</i> <input type="checkbox"/> | <i>Referee</i> <input type="checkbox"/> | <i>Field Marshall</i> <input type="checkbox"/> | <i>Field Setup</i> <input type="checkbox"/> |
| <i>Asst. Coach</i> <input type="checkbox"/> | <i>Trainer</i> <input type="checkbox"/> | <i>Gym Monitor</i> <input type="checkbox"/> | <i>Field Teardown</i> <input type="checkbox"/> |
| <i>Team Mom</i> <input type="checkbox"/> | <i>Concessions</i> <input type="checkbox"/> | <i>Registration helper</i> <input type="checkbox"/> | <i>Game day setup</i> <input type="checkbox"/> |

EMERGENCY AUTHORIZATION: I the undersigned, parent or legal guardian of the participant, a minor, hereby authorize the coaches, assistant coaches or parents of team members acting in the capacity of activity supervisors/vehicle drivers, as my agent, to consent to medical, surgical or dental examination and/or treatment. In case of emergency I hereby authorize treatment and /or care at any hospital. If there is an emergency and I cannot be reached, please contact the listed person who is hereby authorized to act in my behalf.

Full Name: _____

Phone #: _____

WAIVER OF LIABILITY AND DISCLAIMER: To induce the Association of Christian Youth Sports (ACYS) to accept registration and permit participation in ACYS by the named individual, hereby give my consent and agree to release, indemnify and hold harmless ACYS, its officials, coaches and representatives from any claim arising out of injuries or conditions caused by or aggravated by my refusal to obtain available medical treatment based on religious or philosophical beliefs or otherwise.

ACKNOWLEDGMENT AND CONSENT: I Acknowledge receipt of the Accident Reimbursement Plan (on back) and I understand the terms of the plan. For both internal and external use, I acknowledge that ACYS may compile address and mailing labels and may utilize Flag Football photographs of the named individual. I consent to such uses and hereby waive all rights to compensation.

Signature of Parent/Guardian: X

Date: _____

ACYS

Association of Christian Youth Sports

SPORTS COVENANT

Player

In consideration of being a player with the
_____ (Team name),

I agree to the following:

1. I will treat my teammates opponents, coaches, parents and all others involved in ACYS with respect at all times.
2. I will give my full attention to my coach and asst. coach and do my best to follow their instructions.
3. I will always try hard and do my best, both in practice and during games.
4. I will encourage and help my teammates and others who may not be as skilled at sports as I am.
5. While I will strive to win, I will not be overly concerned about winning. I will work to personally improve each day.
6. I will HAVE FUN!

X _____
Player Date _____

Coach & Assistant Coach

In consideration of being named coach or assistant coach of the _____ (Team name).

I agree to the following:

1. I will treat all my players, all other coaches, team moms, and league officials with respect at all times.
2. I will follow both the letter and spirit of the ACYS rules & regulations.
3. I will deal openly and honestly with my players, their parents, and league officials.
4. I will do my best to teach skills, teamwork, and good sportsmanship to all of my players through the use of positive motivation.
5. I will never verbally abuse my players, intentionally embarrass them, or hold them up to ridicule.
6. I realize that I must teach by example, so I will not embarrass myself and my team by yelling or arguing with officials, or blaming officials for my team's shortcomings.
7. I will not be preoccupied with winning. I will measure my success as a coach by the improvement of each of my players and in their growth as team members.
8. I realize that ACYS Sports is for kids. I will do my best to assure all of my players HAVE FUN.

X _____
Head Coach Date _____

X _____
Asst. Coach Date _____

Parent (s) / Guardian(s)

In order to assist my child in his/her sports experience, I / we agree to the following:

1. I realize that ACYS players are not accomplished athletes. Therefore, I will support my child unconditionally regardless of how well he/she does on the sports field.
2. I will encourage my child to do his/her very best at all times, whether at practice or in a game.
3. I will support the coach & asst. coach in all their efforts to teach skills, teamwork, and good sportsmanship to the players.
4. I will root for my child's team, and at the same time I will applaud the efforts of all the players in the game. I will NEVER criticize another player.
5. I realize that who wins and who loses ACYS games is of little consequence. I will not place pressure on my child to win.
6. I know that ACYS Sports is for kids. I will not try to live or relive my own athletic experiences/dreams through my children.
7. I will not embarrass myself and/or my child by criticizing or yelling at officials, coaches, or other parents.
8. I realize that my child's Sports league is run by a dedicated group of volunteers. I will support my league officials, and lend a hand with the many tasks required for the smooth administration of my local league.
9. I will share the FUN OF ACYS Sports with my child.

X _____
Parent(s) / Guardian (s)
Date _____