

**GWINNETT FOOTBALL LEAGUE REGISTRATION FORM**

\_\_\_\_\_

Last                                      First                                      MI                                      Date of Birth                                      Age (as of Sept 1, this year)

Address: \_\_\_\_\_

Street                                      City                                      State                                      Zip

Home Phone: \_\_\_\_\_ School attending in fall \_\_\_\_\_ Grade in fall \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Father's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ e-mail \_\_\_\_\_

Physical Defects (If Any): \_\_\_\_\_

Comments: \_\_\_\_\_

**CODE OF CONDUCT**

The GFL is a recreational youth football and cheerleading program that strives to teach sports skills and techniques in an atmosphere where good sportsmanship, physical fitness, and enjoying the program are stressed. The parents, spectators, and participants must at all times conduct themselves with the utmost good character and display behavior that is in keeping with the purpose of the GFL. Improper conduct directed towards coaches, officials, or players will not be tolerated. Consumption or possession of alcohol, any controlled substance, or tobacco products at any Gwinnett Football League activity whether a practice or game is prohibited. Profanity will not be tolerated. Strict adherence to the rules of the GFL is required. Your coach has been provided an up-to-date copy of the GFL rules. As a parent or guardian, you acknowledge that you have been made aware of the GFL Code of Conduct and that you understand your obligations as it pertains to the Code of Conduct. You agree to be bound by the terms and conditions of the Code of Conduct and understand that it is your responsibility to see that all that attend games and practices with you are also so bound. You further understand that the GFL Board of Directors is empowered to enforce all provisions of the Code of Conduct as well as the rules and By-laws of the Gwinnett Football League, Inc. and that if you violate the terms and conditions of the Code of Conduct, the By-laws, or the rules and regulations, you can be barred from further participation in all GFL activities.

**EMERGENCY MEDICAL AND SURGICAL TREATMENT AND RELEASE AND HOLD HARMLESS**

The patient and others whose signatures are attached below do hereby consent to any and all medical and surgical treatments including anesthesia and operations which may be deemed advisable by his or her physicians and surgeons. The intention hereof being to grant authority to administer and to perform all and singularly any examinations, treatments, anesthetics, operations and diagnostic procedures which may now or during the course of the patient's care be deemed advisable or necessary. We also agree that the patient, when admitted, is to remain in the hospital until his or her physician recommends the patient's discharge and to pay all bills incurred.

**NOTE:** I assume all risks and hazards incidental to such participation including transportation to and from the activities and participation in stunts and tumbling, and I do hereby waive, release, absolve, indemnify and agree to hold harmless the Gwinnett Football League, Inc. and/or any of its member associations, including officers, organizers, sponsors, managers, coaches, supervisors, and other participants and persons transporting my child to and from the activities from any claim arising out of injury to my child.

**AGE-BASED PROGRAM - FOOTBALL**

GFL is an age-based recreational football league. Many football players vary tremendously in height and weight even within the same age categories. All participants in GFL football must participate at their age level irrespective of their size or other physical limitations. The GFL will not consider any request for a football player to play in an age group other than the one he is entitled to play in by virtue of his date of birth. By completing this form, you are acknowledging you have been advised of this information prior to registering and that you nevertheless wish for your child to participate in the GFL football program.

In witness of our consent and agreement to the matters stated above, we have subscribed our signatures below.

\_\_\_\_\_

Minor-Patient-Participant

\_\_\_\_\_

Parent or Guardian

\_\_\_\_\_

Date

\_\_\_\_\_

Parent or Guardian