

# USA SELECT

NATIONAL YOUTH FOOTBALL LEAGUE

P. O. Box 23056, San Antonio, Texas, 78223

## FOOTBALL TEAM/CLUB REGISTRATION FORM

Check Box for your State:

<input type="checkbox"/> ALABAMA SELECT	<input type="checkbox"/> CALIFORNIA SELECT	<input type="checkbox"/> INDIANA SELECT	<input type="checkbox"/> PENNSYLVANIA SELECT
<input type="checkbox"/> ARIZONA SELECT	<input type="checkbox"/> FLORIDA SELECT	<input type="checkbox"/> IOWA SELECT	<input type="checkbox"/> TENNESSE SELECT
<input type="checkbox"/> ARKANSAS SELECT	<input type="checkbox"/> GEORGIA SELECT	<input type="checkbox"/> LOUISIANA SELECT	<input type="checkbox"/> TEXAS SELECT
	<input type="checkbox"/> ILLINOIS SELECT		

Team/Club Name: \_\_\_\_\_ Year/Season: \_\_\_\_\_

President/Commissioner Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_ Team/Club Website Address: \_\_\_\_\_

Team/Club Colors: \_\_\_\_\_ Team/Club Mascot: \_\_\_\_\_ CONFERENCE: \_\_\_\_\_

OUR TEAM/CLUB WILL HAVE A TEAM IN THE FOLLOWING AGE DIVISIONS: (place and "X" in the box)

FLAG <input type="checkbox"/>	8U <input type="checkbox"/>	9U <input type="checkbox"/>	10U <input type="checkbox"/>	11U <input type="checkbox"/>	12U <input type="checkbox"/>	13U <input type="checkbox"/>	14U <input type="checkbox"/>
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Team Fees per Age Group:

FLG - \$75    8U - \$75    9U - \$75    10U - \$75    11U - \$75    12U - \$75    13U - \$150    14U - \$150

USA Select National Youth Football League Inc. (USA Select) follows the National Federation High School (NFHS) Football rules with variances. Each State league can adopt additional variances with written permission from USA Select NYFL.

All teams must carry player injury insurance for each age division registered. Insurance is available via our carrier Wilson Sports Insurance.

All coaches must have current year USA Football Certification, Background Check, First Aid, and Safe Sport Act, administered by Trusted Coaches. All non-coaches/volunteers must have current year Background Check, First Aid, and Safe Sport Act, administered by Trusted Coaches..

No birth certificates accepted, Players must have one of the following: State ID Card (from state you are registered to play), Military Dependent I.D. Card, or current valid U.S. Passport/Card.

All players must have a current school year physical, as well as have agreed and signed all releases/waivers via paper or electronically.

All coaches and non-coaches/volunteers must also have signed waiver/release on file.

All team administrators and coaches should make themselves familiar with the rules of USA Select and the State league prior to registering.

I have indicated the registration for the number of age groups indicated above.

I understand that once accepted into the State league for the year and season indicated above, that the fee is non-refundable.

I agree that my Team/Club will abide by the game rules and administrative rules of USA Select and my State league.

I understand that all coaches must be approved by the State league of registration.

**The above terms and conditions have been acknowledged and agreed upon by:**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(This Form is to be completed and returned with Fees to your State Director)**

Applicant - DO NOT WRITE IN SHADED AREA

OFFICE USE ONLY

CONFERENCE: \_\_\_\_\_

Year: 20\_\_\_\_ Season: Spring Fall (circle one)

Pres/Commish Background Check Passed: Y N

Registration Received By: \_\_\_\_\_

Join League Application Received: Y N

Returning Team/Club: Y N

Total Fees for Team Registration: \_\_\_\_\_

Player Injury Insurance on File: Y N