

**Belvidere Youth Athletic Association Registration**  
<https://clubs.bluesombrero.com/belvidereyaa>

League Sport: Softball / Basketball / Soccer

Date: \_\_\_\_\_

I wish to volunteer for: Coach / Assistant Coach / Field Maintenance

\*All coaches are required to have a background check and coaches certificate.\*

SIZE: YS, YM, YL, YXL, AS, AM, AL, AXL

**Player's Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent/Guardian Name &Phone #:** \_\_\_\_\_

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

**Email:** \_\_\_\_\_

**Emergency Contact Name/ Phone#:** \_\_\_\_\_

**Physician Name/Phone #:** \_\_\_\_\_

Hospital Preference: \_\_\_\_\_

**Parent or Guardian Authorization:**

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Medical Personnel (i.e. EMT, First Responder, E.R. Physician, etc).

**Please list any allergies/medical problems, including those requiring maintenance medications (i.e. diabetic, asthma, seizure disorder):** \_\_\_\_\_

\_\_\_\_\_

PARENT / GUARDIAN AUTHORIZATION, DISCLAIMER, AND WAIVER OF LIABILITY

As the parent/legal guardian of \_\_\_\_\_ (child's name), I give my approval for his/her participation in any and all activities during the current season for the sport indicated above. I assume all risks and hazards incidental to such participation including transportation to and from the activities. I do hereby waive, release, absolve, indemnify and agree to hold harmless the participants in the BYAA program and persons transporting my child to and from activities for any claims arising out of any injury to my child, except to the extent and in the amount covered by the accident-liability insurance carried by the Athletic Association. I also, give my permission for BYAA to take and use any photograph or video/audio recording which my child appears for promotional purposes on the association website. I accept that tryouts may be held when necessary for team selections based on league guidelines. I acknowledge and agree to the BYAA commitment and the Code of Conduct Policy posted at <https://clubs.bluesombrero.com/belvidereyaa> and recognizes that participation is subject to the by-laws established by the association.

I consent to and attest to all the information on this form.

**Parent / Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**BYAA USE ONLY**

**SPORTS LEVEL OF PLAY:** \_\_\_\_\_

**PAID: CASH / CHECK #**