



AGAWAM YOUTH FOOTBALL ASSOCIATION FLAG FOOTBALL REGISTRATION FORM



<u>FLAG</u>	
1 & 2	<input type="checkbox"/>
3 & 4	<input type="checkbox"/>

Player Name: _____ **Date of Birth:** ____ / ____ / ____

Address: _____ **City:** _____

State: ____ **Zip:** _____ **Primary Phone:** _____ **Secondary Phone:** _____

Grade of Player Fall 2026: _____ **School of Player Fall 2026:** _____

E-Mail Address: _____
(PRINT CLEARLY)

E-Mail Address: _____
(PRINT CLEARLY)

Agawam Youth Football Association Grant of Permission & Release

I, the undersigned parent/guardian of _____,
(Name of Player)

hereby grant permission for my child to participate in the Agawam Youth Football Association. I, hereby grant and on behalf of my heirs, executors and administrators, successors and assignees, irrevocably and unconditionally RELEASE AND DISCHARGE THE AGAWAM YOUTH FOOTBALL ASSOCIATION, TOWN OF AGAWAM, its agents, representatives, servants, employees, former employees, officers, and volunteers from any and all claims, charges, demands, complaints, liabilities, damages, actions, cause of action, suits, rights, costs, losses, debts and expenses of any nature whatsoever which may arise from or be the reason of any and all known and unknown, foreseen and unforeseen, personal and bodily injuries, sickness, disease or death, and any and all consequential damages which may result or rise from or by reason of my child's participation and/or attendance in this program and the use of town property and premises.

The undersigned hereby acknowledges that he/she has read this document and fully understands its content. The undersigned further acknowledges that his/her execution of this document is his/her free act and deed.

Parent/Guardian Signature: _____ **Date:** ____ / ____ / ____

Does your child have a special medical need that our staff should be aware of in order to help him/her adapt to and progress with this program Yes No

If yes, please explain _____

Please make checks out to: AYFA / Venmo @coachdematteo

Administrative Use Only:				
Date	Cash/Amount	Check #/Amount	Venmo/Amount	Received By: