*** REQUIRED FIELDS**

Association Use

DIVISION **TEAM**

Current Year

❑ Returning
❑ New

Coquitlam Minor Football Association
www.coquitlamfootball.com

CMFA Registration & Membership Application

*** Participant's Name** _____
Last Name **PLEASE PRINT CLEARLY** **First Name**

*** Address** _____

*** City** _____ *** Province** _____ *** P / C** _____

*** Home Phone** (_____)_____ *** Cell** (_____)_____

*** Parent(s) / Legal Guardian(s) Names** _____

*** Parent(s) E-mail** _____

*** Birth Date** _____/_____/_____ *** Care Card Number**_____/_____/_____
Year Month Day

DECLARATION

I, the undersigned, hereby agree to play for the Coquitlam Minor Football Association throughout the current season. I also agree to abide by all the rules, by-laws and regulations, of my team, League, Association, and the B.C. Amateur / Canadian Amateur Football Associations which at anytime are legally in effect. I declare the above information correct and understood by me.

_____ _____
Date * Players Signature

PHOTO RELEASE

❑ I grant permission for my child's photo to be published on the Internet.

❑ No. I do not grant permission for my child's photo to be published on the Internet.

_____ _____
Date * Parent/Legal Guardian Signature

PARENT PARTICIPATION

I understand that an Adult in my family will be asked to perform field or team duties during the upcoming season.
I also understand that if an assigned duty is not completed, participation in association activities may be suspended.

_____ _____
Date * Parent/Legal Guardian Signature

Association Use

Cash___Cheque___Other___

❑ Birth Certificate
❑ Care Card Number
❑ Equipment Deposit
❑ Medical Information Sheet
❑ T-Shirt size

Initials _____
Notes_____
_____
_____

CONSENT

My child and I are aware that participating in Football / Cheerleading is a potentially hazardous activity. I assume all risks associated with participation in this sport, including, but not limited to falls, contact with other participants, the effects of the weather, traffic, and other reasonable risk conditions associated with the sport. All such risks to my child are known and understood by me. I understand the information that this consent form has indicated to me and I agree to its conditions on behalf of my child.

_____
*** PARENT / LEGAL GUARDIAN SIGNATURE**

REFUND POLICY - Full refund (less $25.00 processing fee) up to and including the Coquitlam Tournament. 50% refund up to and including the 1st league game. No refunds after the 1st league game. Refund amounts are based upon the date equipment is returned to the CMFA Executive.