

**Check One:**  
 CHEER  
 FOOTBALL

**TRAINER CONTRACT**  
**PACIFIC COAST YOUTH**  
**FOOTBALL/CHEERLEADING CONFERENCE, INC.**  
 (Revised: 1/10)

**Check off List:**  
 New ID card w/picture  
 Copy of School ID or Calif. ID  
 Copy of Signature Page  
 From Code of Conduct

SEASON: 2010 ASSOCIATION NAME: \_\_\_\_\_

This form must be completely filled out for non-players/cheerleaders over 14yrs old & under the age of 18yrs old that wish to participate within the Pacific Coast Conference. 18yrs and older as of July 31<sup>st</sup> must be Live Scanned and fill out the Coaches & Adult Staff Contract.

**SECTION I: Applicant Information: MUST BE PRINTED CLEARLY!**

Full Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_  
FIRST LAST MIDDLE As of July 31<sup>st</sup>

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

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Emergency Phone: (\_\_\_\_) \_\_\_\_\_

Parents Name: \_\_\_\_\_ Parents E-Mail Address: \_\_\_\_\_

**SECTION II: Team/Squad Division: (Check one)**

Flag 5, 6 & 7 yr. olds     Tiny Mite 7 & 8 yr. olds     Mity Mite 7, 8 & 9 yr. olds     Jr. Pee Wee 8, 9 & 10 yr. olds     Pee Wee 9, 10 & 11 yr. old     Jr. Midget 10, 11 & 12 yr. old     Midget 11, 12, 13 & 14 yr. olds     All American 6<sup>th</sup> & 7<sup>th</sup> grade unlimited wt.

**SECTION III: Team/Squad Position: (Check one)**

Team/Squad Name: \_\_\_\_\_ *Football/Cheer*  
 Team Trainer *(Live Scan not required)*      Head Coaches Name: \_\_\_\_\_  
 Cheer Trainer *(Live Scan not required)*

**SECTION IV: Medical Information - Please indicate if you have any of the following:**

	Yes	No		Yes	No		Yes	No
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	Head injuries within past year	<input type="checkbox"/>	<input type="checkbox"/>	Palpitations	<input type="checkbox"/>	<input type="checkbox"/>
Allergies	<input type="checkbox"/>	<input type="checkbox"/>	Serious Illness	<input type="checkbox"/>	<input type="checkbox"/>	Chest Pains	<input type="checkbox"/>	<input type="checkbox"/>
Glasses/Contact	<input type="checkbox"/>	<input type="checkbox"/>	Bleeding tendencies	<input type="checkbox"/>	<input type="checkbox"/>	Dizziness	<input type="checkbox"/>	<input type="checkbox"/>
Dental braces or bridges	<input type="checkbox"/>	<input type="checkbox"/>	Sickle Cell Tendency	<input type="checkbox"/>	<input type="checkbox"/>	History of heart Murmur	<input type="checkbox"/>	<input type="checkbox"/>
Repeated bone or joint injuries	<input type="checkbox"/>	<input type="checkbox"/>	Surgery within past year	<input type="checkbox"/>	<input type="checkbox"/>	Kidney diseases/infections	<input type="checkbox"/>	<input type="checkbox"/>
Fractures within past year	<input type="checkbox"/>	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	Seizures	<input type="checkbox"/>	<input type="checkbox"/>
Tetanus (shot date if known) _____			Any Current Medications: <input type="checkbox"/> <input type="checkbox"/> List: _____					

**SECTION V: Parents Acknowledgment:**

I, the parent of the above named applicant to the Pacific Coast Youth Football and Cheerleading Conference, Inc. (hereafter "PCYFCC") hereby give my approval to said applicant's participation in any and all activities during the current season. I agree that if my child engages in physical exercise or activity associated with such participation, or uses any facility or premises, he or she does so at his or her own risk, and assumes all risk of injury, damage or death. This includes, without limitation, the use of any equipment or any facility, and the participation in any activity, class, program or instruction. I agree, individually and on behalf of my child, our heirs, assigns, personal representatives and next of kin, to release and discharge the PCYFCC, and any of its affiliated entities or sponsoring agencies and their officers, directors, instructors, advisors, employees, agents, and co-participants from any and all liability whatsoever for injuries, damages, claims or causes of action (known or unknown) arising out of their negligence. This includes without limitation injuries or damages which may result from physical contact with participants or instructors, slipping or tripping and falling, or otherwise being injured due to a dangerous condition of property, improper maintenance of any premises or equipment, inadequate security, inadequate supervision, and/or improper or negligent hiring or instruction. I, for myself, my spouse, my child, and on behalf of my heirs, assigns, personal representatives and next of kin, hereby agree to indemnify PCYFCC for any costs, including attorneys' fees, arising out of or related to claims asserted against it in connection with my child's participation.

**I acknowledge that I have carefully read this Waiver and Release and fully understand that it is a release of liability. I am waiving any right that I or my child may have to bring a legal action to assert a claim against PCYFCC or others for our negligence. This waiver and release is intended to be interpreted as broadly and all encompassing as permissible under California law.**

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**SECTION VI: Applicant Acknowledgment:**

I do hereby certify by my signature below, that I understand all of the obligations and requirements that have been placed upon me as a member of the Pacific Coast Conference and I agree to abide by and comply with all the rules, regulations and By-Laws, as set forth by the Pacific Coast Youth Football/Cheerleading Conference, Inc., and the Association that I am representing. I also acknowledge the fact that the Pacific Coast Conference has a **ZERO TOLERANCE** policy in effect and if I violate any rules, regulations or By-Laws the Pacific Coast Conference has the right to suspend my status as a member of said organization.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**SECTION VII: President/Cheer Director Verification:**

I verify that this applicant meets all of the requirements of our Association and the Pacific Coast Youth Football/Cheerleading Conference, Inc. and the applicant will abide and comply with all the rules, regulations and By-Laws set forth by this organization.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_