

CCYFCL 2023 Official ID Card Form

1. This form must be filled out completely.
2. Original Birth Certificate, or a Certified Copy with a Raised Seal, or Passport (no Xerox copies, Hospital Notifications of Birth or Baptism Certificates accepted.)
3. Fee Due at time of issue as cash or check.
4. This ID Card form Completed

ALL INFORMATION BELOW MUST BE COMPLETED BY PARENT/GUARDIAN

Player's Info:

Program Name _____

Last Name _____ First _____ M.I. _____

Address _____ City _____

State _____ Zip _____

Birth Date _____ Age (as of 8/2/2023) _____

Grade in September _____ School _____

Height _____ Weight _____ Sex _____

Parent Info:

Mother's Full Name _____

Address (if different from above) _____

City/State _____ Zip _____

Home Phone _____ Work Phone _____

Father's Full Name _____

Address (if different from above) _____

City/State _____ Zip _____

Home Phone _____ Work Phone _____

I hereby certify that all the above information is true, and I will assume any and all risk and liability in the above player's participation in this youth football program. I also agree to return all equipment that is issued or will pay for its replacement.

Parent/Guardian Signature _____ **Date** _____

DO NOT WRITE BELOW THIS LINE

Approval Initials: _____

Paid By:

Cash _____ Check: _____