

BOB FREESEN YMCA / JAYFL

Flag Football Registration Form 2022 (Assistance is available)



Name: _____ Grade: _____ Age: _____

Address: _____ Email: _____

Phone: _____

T-shirt Size: Yth Sm Yth Med Yth Lg Ad Sm Ad Med Ad Lg Ad XL

Volunteer Coaches are essential, would you be willing to coach? Yes No

Amount Paid: _____ Paid by: check / cash / credit card

Staff Initials: _____ Date: _____



BOB FREESEN YMCA
1000 Sherwood Eddy Lane
Jacksonville, IL 62650
P 217-245-2141



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



Jacksonville Area Youth Football Organization
Jr. Crimson Jackals

FLAG FOOTBALL

(LIMITED CONTACT BASED ON AGE)

BOB FREESEN YMCA
FALL 2022





FLAG FOOTBALL / JAYLF

Mon., August 15

Limited contact based on age.

All players are required to have a mouthpiece.

1st-2nd grades

6 on 6 with Coach QB

3rd-4th grades

6 on 6 with Coach QB & advancing to 7 on 7 play

5th-6th grades

8 on 8 with limited contact with helmet and shoulder pads

Games: Sept 3



Practice: Monday, August 15

Games: Sept 3

Registration Begins: May 20

Fees:

Members: \$30

Non-Members: \$65

If you miss the deadline, please contact the sports director, Glenn Pickens at 217-245-2141.

(A \$5 late fee will be applied to the original registration fee.)

Please return Registration to the YMCA.

Assistance is available.



In consideration for my child's acceptance as a participant in the athletic program of the Bob Freesen YMCA, I, for myself, my child, my heirs, executors, administrators, and assigns, do hereby release and discharge the Bob Freesen YMCA, its agents, representatives, officers, directors or employees of and from all claims or demands for damages, losses, or injuries incurred by my child during the course of participation in programs at the Bob Freesen YMCA. I give my consent, now and for all time, to YMCA of the USA, YMCA and collaborating third parties to make, reproduce, edit, broadcast or rebroadcast: video film or footage of my child, sound track recordings of my child, photo reproductions of my child, and any narrative account of my child's experience. My consent gives permission to use the above materials for publication, display, sale or exhibition in promotions, advertising, education and legitimate business uses. Use includes reproductions in any form and media, adaptations and/or revisions, throughout the world and forever. I understand and agree there may be no compensation for this, and I will not make any claim for payment of any kind. I may, or may not be, identified in such reproductions; however, my name will not be used to endorse any particular commercial products or commercial services.

Date _____

Parent or Guardian _____