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WWW.AZYSL.ORG



- VALLEY WIDE GAME LOCATIONS
- WEEKLY PRACTICES
- GAMES EVERY SATURDAY
(EXCLUDING HOLIDAYS)

FALL 2017 TACKLE FOOTBALL REGISTRATION

NATIONAL LEAGUE

Age/Weight 11-Man Programs

8 Games Guaranteed
(League Age as of 7/31/17)

8U DIVISION

7 Years Old & Under = Unlimited
8 Years Old = 120lbs Max

9U DIVISION

8 Years Old & Under = Unlimited
9 Years Old = 130lbs Max

10U DIVISION

9 Years Old & Under = Unlimited
10 Years Old = 140lbs Max

11U DIVISION

10 Years Old & Under = Unlimited
11 Years Old = 150lbs

12U DIVISION

12 Years Old & Under = Unlimited

14U DIVISION (8th Grade Max)

14 Years Old & Under = Unlimited

(Listed Weight Without Equipment = Max Game Day Weight)

REGISTRATION

\$125 Per Player

*This does not include equipment or uniforms.
Players are responsible for purchasing their own equipment and uniforms.*

Register online at www.azysl.org

FOOTBALL ASSOCIATIONS

AYSL welcomes associations state-wide!

Association Requirements

- Consist of a minimum of 4 teams
- Possess Proof of Insurance (AYSL can assist)
- Possess practice fields for your teams
- Possess game day fields for home games
- Responsible for your team expenses (i.e. practice & game fields, referees)

VOLUNTEERS

All volunteers must complete a background screening thru AYSL.
All coaches must complete the USA Level I Coaching Certification.
Visit www.azysl.org to complete these requirements.

IMPORTANT DATES

Player Registration Deadline:
August 31, 2017

Mandatory Team Certification Day:
September 9, 2017
ALL PLAYERS AND TEAM STAFF MUST ATTEND.

Tackle Schedule Release:
September 18, 2017

FIRST OFFICIAL GAME:
September 30, 2017

TEAM CERTIFICATION DAY

- ALL players and coaches must attend Team Certification Day.
- All players must bring original birth certificates.
- All 14U players must also bring grade level verifications.
- All weighted players must weigh in.



Registration Form (One Child Per Form)

Child's Last Name: _____ Child's First Name: _____

Child's League (AYSL/Other): _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Parent/Guardian Full Name: _____ Cell Phone: _____

Email: _____ Alternate Phone: _____

Division: 7U 8U 9U 10U 11U 12U 14U

Coach/Team/Referee Request (if applicable): _____

Please provide at least ONE phone number so that the league may contact you in case of an emergency. Your assigned team may contact you and the league may contact you regarding your child.

Volunteer: (Parent/Guardian for Head Coach's child!)
 Head Coach Assistant Coach

Parent/Guardian Signature (Required): _____

Date: _____

By signing this form, my child and I hereby acknowledge and fully understand that the Parents/Legal Guardians assume all risk of injury. Serious injury can include bruises, broken ones, torn ligaments, cuts, spinal injury head injuries, brain damage & death. Parents/Legal Guardians assume the risk of harm from the inherent dangers of sports itself, from failure to consult with proper healthcare or medical providers regarding the proper size, fit, & application of the equipment available, &/or failure to purchase &/or to properly use any available equipment. I agree to indemnify and hold harmless and defend AYSL and its officers, directors, agents, servants volunteers and employees from any and all claims resulting from injuries, including death, damages and losses sustained by me or my minor child arising out of, connected with, or in any way associated with the activities of the event(s). AYSL does not provide medical insurance and is thereby not responsible for any medical costs. I understand the "No Refund" policy regarding participation with AYSL. AYSL reserves the right to use any photograph or videography taken during an AYSL sponsored event without the expressed written permission of the subjects included within the photo or video. Photos may be used in publications or other media material produced, used or contracted by AYSL including but not limited to: view books, catalogues, search pieces, newspapers, magazines, television, websites, etc.

OFFICE USE ONLY

Reg. Date _____ Received _____

Amt. Paid _____ Entered _____

Cash Credit Card Check _____