BRUNSWICK COUNTY YOUTH FOOTBALL

BRUNSWICK COUNTY PARKS & RECREATION

JUNIOR FOOTBALL TEAMS

AGES & WEIGHTS:

9 & under – 120lb. max weight May advance the ball – 100lb. max weight.

Any participant whose seventh birthday falls on or before July 31 of the current year, and any boy whose ninth birthday falls on or before July 31 of the current year is eligible to compete and complete the current Brunswick Football League season.

REGISTRATION FEE: \$50.00

COPY OF BIRTH CERTIFICATE, PAYMENT & COMPLETED REGISTRATION FORM TO BE ELIGIBLE.

TENTATIVE PRACTICE START DATE IS AUGUST 4, 2024

SENIOR FOOTBALL TEAMS

AGES & WEIGHTS:

12 & under – 160lb. max weight May advance the ball – 130lb. max weight.

Any participant whose tenth birthday falls on or before July 31 of the current year, and any boy whose twelfth birthday falls on or before July 31 of the current year is eligible to compete and complete the current Brunswick Football League season.

REGISTRATION FEE: \$50.00

COPY OF BIRTH CERTIFICATE, PAYMENT & COMPLETED

REGISTRATION FORM TO BE ELIGIBLE.

TENTATIVE PRACTICE START DATE IS AUGUST 4, 2024

REGISTRATION DEADLINE IS JULY 31, 2025

EACH OF THE 12 TEAMS IS LIMITED TO THE FIRST 35 PLAYERS REGISTERED REGISTRATIONS MUST BE DONE IN BOLIVIA / ONLINE or MAILED IN BY



LEAGUE CONTACT

DANIEL RABON @ 910.253.2670 or daniel.rabon@brunswickcountync.gov

WEBSITE:

http://bcparks.recdesk.com/recdeskportal/

VOLUNTEERS:

Email Daniel if Interested.



YOU CAN REGISTER ONLINE @ https://bcparks.recdesk.com/Community/Program

2025 BRUNSWICK COUNTY YOUTH FOOTBALL REGISTRATION

(FORM MUST BE FILLED OUT COMPLETELY WITH BIRTH CERTIFICATE & FEE PAID TO BE ELIGIBLE)

PLEASE PRINT NEATLY OR TYPE & FILL OUT COMPLETELY

| MAILING ADDRESS: (P.O. BOX or STREET) (CITY) (ZIP) PHYSICAL ADDRESS: (P.O. BOX or STREET) (CITY) (ZIP) HOME PHONE: (P.O. BOX or STREET) (CITY) (ZIP) HOME PHONE: (P.O. BOX or STREET) (CITY) (ZIP) MOM CELL: (P.O. BOX or STREET) (P.O. BOX or STREET) (CITY) MOM CELL: (P.O. BOX or STREET) (P.O. BOX | PARTICIPANT: | | | | | |
|---|--|----------------------------|------------------------|-------------------------------------|-------------------------|-------------------|
| (P.O. BOX or STREET) (CITY) (ZIF) PHYSICAL ADDRESS: (P.O. BOX or STREET) (CITY) (ZIF) HOME PHONE: (910) - EMERGENCY: (910) - MOM CELL: (910) - DAD CELL: (910) - EMAIL: ② WEIGHT: BIRTHOATE: / AGE AS OF JULY 31 ³¹ : PREVIOUS TEAM (IF ANY) SCHOOL: ANY PHYSICAL LIMITATIONS: PARENTAL CONSENT: PLEASE READ & SIGN: APPLICATION MUST BE SIGNED BY AT LEAST ONE PARENT/GUIARDIAN FO PARTICIPANT TO BE ELIGIBLE, BY SIGNING THIS REGISTRATION. YOU ARE STATING THAT YOU UNDERSTAND AND AGREE FOLLOW THE TERMS AND CONDITIONS BELOW. I/WE, the Parents/Guardians of the above-named candidate for a position on any of the BFL Youth Football teams, hereby give MY/OUR approval to his/her participation in all BFL Youth Football activities during the current season. I/WE do hereby waive release, absolve, indemnity and agree to hold harmless the Brunswick County Parks & Recreations BFL Youth Football League and its Associations, the sponsors, supervisors, participants, volunteers and persons transporting MY/OUR child to and from activities for any claim arising out of illness, injury, accidental death damage to personal property sustained in the above activity to MY/OUR child. I/WE and participant agree to abid by the BFL Rules of Conduct. YOUR CHILD MUST PLAY FOR THE TEAM IN THE DISTRICT IN WHICH YOUR PHYSICAL ADDRESS FALLS. IF THERE IS NOT A TI REFORM THAT DISTRICT, HE YEAR WILL BE ABLE TO PLAY FOR THE TEAM IN THE NEXT CLOSEST DISTRICT. RETURNING PLAYERS ARE ASSIGNED TO AND THE TEAM PLAYED FOR INJURSS THEY REGISTER AFTER DEADLINE. AND THEN THE MAY BE PUT ON A WAITING IST OR ASSIGNED TO ANOTHER TEAM. IN THE NEXT CLOSEST DISTRICT. RETURNING PLAYERS ARE ASSIGNED TO AND THE TEAM PLAYED FOR INJURSS THEY REGISTER AFTER DEADLINE. AND THEN THE MAY BE PUT ON A WAITING IST OR ASSIGNED TO ANOTHER TEAM. **INJURY OF A HARD THE STATE OF THE TEAM IN THE PROPERTY OF THE TEAM IN THE NEXT CLOSEST DISTRICT. **RETURNING PLAYERS ARE ASSIGNED TO ANOTHER TEAM. IN THE NEXT CLOSEST DISTRICT. **RETURNING PLAYERS ARE ASSIGNED TO ANOTHER TEAM. IN THE N | | (FIRST) | | (MIDDLE) | | (LAST) |
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| HOME PHONE: | PHYSICAL ADDRESS | • | | , , | | |
| MOM CELL: (910) - DAD CELL: (910) - EMAIL: @ WEIGHT: BIRTHDATE: / AGE AS OF JULY 31 ³⁷ : PREVIOUS TEAM (IF ANY) SCHOOL: ANY PHYSICAL LIMITATIONS: PARENTAL CONSENT: PLEASE READ & SIGN: APPLICATION MUST BE SIGNED BY AT LEAST ONE PARENT/GUARDIAN FO PARTICIPANT TO BE ELICIBLE. BY SIGNING THIS REGISTRATION, YOU ARE STATING THAT YOU UNDERSTAND AND AGREE FOLLOW. THE TERMS AND CONDITIONS BELIOW. I/WE, the Parents/Guardians of the above-named candidate for a position on any of the BFL Youth Football teams, hereby give MY/OUR approval to his/her participation in all BFL Youth Football activities during the current season. I, assumed lifts sks and hazards incidented to such participation in value of the season of the season of the property sustained in the such participation in value of the season of the s | | (P.O. BOX or STREET) | | (CITY) | | (ZIP) |
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| assume all risks and hazards incidental to such participation including transportation to and from such activities, and I/WE do hereby waive release, absolve, indemnity and agree to hold harmless the Brunswick County Parks & Recreation, BFL Youth Football League and its Associations, the sponsors, supervisors, participants, volunteers and persons transporting MY/OUR child to and from activities for any claim arising out of illness, injury, accidental death damage to personal property sustained in the above activity to MY/OUR child. I/WE and participant agree to abid by the BFL Rules of Conduct. YOUR CHILD MUST PLAY FOR THE TEAM IN THE DISTRICT IN WHICH YOUR PHYSICAL ADDRESS FALLS. IF THERE IS NOT A TIFED THAT DISTRICT, HE/SHE WILL BE ABLE TO PLAY FOR THE TEAM IN THE NEXT CLOSEST DISTRICT. RETURNING PLAYERS ARE ASSIGNED TO THE TEAM PLAYED FOR UNLESS THEY REGISTER AFTER DEADLINE AND THEN THI MAY BE PUT ON A WAITING LIST OR ASSIGNED TO ANOTHER TEAM,, YOU ARE NOT GUARANTEED TO BE ON THE SAM TEAM PREVIOUSLY PLAYED FOR IF YOU REGISTER AFTER THE DEADLINE NO REQUESTS AS A PARENT OR GUARDIAN, I ASSUME ALL RESPONSIBILITY FOR ANY UNIFORM / EQUIPMENT THE ABOVE PARTICIPANT RECEIVES FOR THIS PROCARAM. NO ALTERATIONS TO ANY UNIFORM OR EQUIPMENT ARE ALLOWED. UNIFORM / EQUIPMENT PREVIOUSLY PLAYED FOR THE VINIFORM PROVIDED AND THE UNIFORM / EQUIPMENT ARE ALLOWED. UNIFORM / EQUIPMENT PREVIOUSLY PLAYED FOR THE PROGRAM OR IN WILL PAY FOR THE UNIFORM / EQUIPMENT PREVIOUSLY PLAYED FOR THE PROGRAM OR IN WILL PAY FOR THE UNIFORM / EQUIPMENT PREVIOUSLY PLAYED FOR GAMES) PLETURE CONSENT FOR FILM / WEBSITE / ADVERTISATIONS: In the event of injury to MY/OUR child, I/WE hereby grant authority qualified paramedic/ physician to render such medical treatment as said paramedic/physician deems necessary under the circumstances. (BRUNSWICK COUNTY E.M.S. IS PRESENT FOR GAMES) PLETURE CONSENT FOR FILM / WEBSITE / ADVERTISATIONS: I/WE give permission to have my child's picture on the BCP&R/league web site, program advertisements, video | hereby give MY/OUR | approval to his/her po | articipation in | all BFL Youth Football activ | ities during the cu | ırrent season. I |
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