



Abbotsford Falcons Football Association

PO Box 8000, Unit 635
Abbotsford, BC V2S 6H1
www.abbotsfordfalcons.org

Division	Year Born (Circle one)
Fall Flag	2015 - 2014 - 2013
Atom	2012 – 2011
Peewee	2010 – 2009
Junior Bantam	2008 – 2007
Spring Bantam	2006 – 2005
Spring Midget	2004 – 2002

Today's Date: _____

Returning Player: YES or NO
Did you register with Esportsdesk? YES or NO
Shirt size: Youth/Adult S / M / L / XL / XXL

Players Name: _____ Date of Birth: _____

Address: _____

City: _____ Postal Code: _____ Phone # _____

Primary Contact: _____ Best Contact # _____

Email Address: _____

Secondary Contact: _____ Best Contact # _____

Email Address: _____

Photo Release:

YES! I give the Abbotsford Falcons permission to use my son or daughters name on the Abbotsford Falcons Website, Social Media Websites, Abbotsford Times and Abbotsford News Newspapers.

NO! I do not give the Abbotsford Falcons permission to use my son or daughters name on the Abbotsford Falcons Website, Social Media Websites, Abbotsford Times and Abbotsford News Newspapers.

Did someone refer you to the Abbotsford Falcons? Who? _____

Is there a custody arrangement that we should be aware of? Yes or No Details: _____

Are you interested in being a part of the Fundraising Committee? Yes or No Name _____

Are you interested in being a part of the Executive Committee? Yes or No Name _____

Are you interested in Coaching this Season? Yes or No Coach Name _____

Phone # & Email _____

Are you interested in playing Spring Flag? (Age as of December 31)

U10 (Age 7/8/9) U12 (Age 10/11) U14 (Age 12/13) U16 (Age 14/15) U19 (Age 16/17/18)

PARENT & PLAYER CONSENT FORM

While the Abbotsford Falcons Football Association and its directors, coaches and volunteers make every effort to make Canadian style tackle football as safe as possible you must recognize that it is a contact sport and that your child may incur an injury(s). We make every effort to ensure all gear is checked to ensure that players are protected. Injuries may arise from many causes including but not limited to the following:

Player to player contact (including blocking and tackling)

- ❖ Contact with the ground
- ❖ Contact with the ball
- ❖ Tripping and falling
- ❖ Slipping and falling
- ❖ Collision with practice equipment such as tackling sleds and dummies
- ❖ Collision with the field equipment such as goal posts, down boxes or measurement chain
- ❖ Collision with game officials, coaches, managers or other on field volunteers
- ❖ Accidents while traveling by public or chartered transportation providers

Accidents can be the result of nature of the activity and can occur with or without any fault on either the part of the player, the coaches or Abbotsford Falcons Football and its board of directors, or the facility where the activity is taking place. By allowing your son/daughter to participate in this activity, you are accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for your child.

I give _____ (name of player) permission to participate in any event sponsored or approved by the Abbotsford Falcons Football Association. I understand that my child may be exposed to certain risks while participating in this activity. Accidents and injuries may occur.

Signature of Parent/Guardian

Date

Printed name of Parent/Guardian

Signature of Player

Player Medical History

This information is kept with either the Team Manager and/or Trainer at all times (practices and games). The information provided will be a point of reference in the case of a medical emergency. It is confidential and will only be shared with coaching staff or medical personnel on a need to know basis. Please print very clearly.

Players Name: _____ Date of Birth: _____

Primary Emergency Contact: _____

Phone Number _____ Alternate Contact: _____

Secondary Emergency Contact: _____

Phone Number _____ Alternate Contact: _____

Medical Conditions (Please circle)

Head Injury Seizures Neck/Back Disorder Fainting Spells Asthma Eye Problems Nosebleeds
Heart Problems Diabetes Hepatitis Allergies Fractures Other medical conditions (please describe)

Previous Injuries/Surgeries _____

Allergies (please include severity and if EpiPen is needed) _____

Medications taken regularly _____

Corrective Lenses: Yes No

Parent/Guardian Signature: _____

Abbotsford Falcons Football Association Code of Conduct

Members of ABBOTSFORD FALCONS FOOTBALL and participants in ABBOTSFORD FALCONS FOOTBALL programs and activities are expected to conduct themselves at all times in a manner consistent with the values of ABBOTSFORD FALCONS FOOTBALL. This conduct applies to all forms of interaction, be it face-to-face, or via electronic, including social media (such as Twitter, Facebook, Bulletin Boards, etc...).

Conduct that violates these values may be subject to sanctions pursuant to ABBOTSFORD FALCONS FOOTBALL ASSOCIATION Discipline Policy. All participants of ABBOTSFORD FALCONS FOOTBALL have a responsibility to:

1. Maintain and enhance the dignity and self-esteem of members and participants of ABBOTSFORD FALCONS FOOTBALL by:
 - ❖ Demonstrating respect to individuals regardless of gender, ethnic or racial origin, sexual orientation, age, marital status, religion, political belief, disability or economic status;
 - ❖ Focusing comments or criticism appropriately and avoiding public criticism of athletes, coaches, officials, organizers, volunteers, staff and members;
 - ❖ Consistently demonstrating the spirit of sportsmanship, sports leadership and ethical conduct and practices;
 - ❖ Ensuring that the rules of the sport and the spirit of such rules are adhered to.
2. Abstain from the use of alcohol, cannabis and tobacco while participating at ABBOTSFORD FALCONS athletic events.
3. Abstain from the non-medical use of drugs or the use of performance enhancing drugs or methods.
4. Refrain from any behavior that constitutes harassment, where harassment is defined as comment or conduct, directed towards an individual or group, which is offensive, abusive, racist, sexist, degrading or malicious.
5. Refrain from any behavior that constitutes sexual harassment, where sexual harassment is defined as unwelcome sexual advances or conduct of a sexual nature when submitting to or rejecting this conduct influences decisions which affect the individual, such conduct has the purpose or effect of diminishing performance, or such conduct creates an intimidating, hostile or offensive environment;
6. Comply at all times with the Constitution, Bylaws, policies, rules and regulations of ABBOTSFORD FALCONS, as adopted and amended from time to time, including complying with any contracts or agreements executed with ABBOTSFORD FALCONS.

In addition to the above, Coaches will have a responsibility to:

1. Ensure a safe environment by selecting activities and establishing controls that are suitable for the age, experience, ability and fitness level of athletes;
2. Avoid compromising the present and future health of athletes by communicating and cooperating with registered medical practitioners in their diagnosis, treatment and management;
3. Educate athletes about the dangers of drugs and performance-enhancing substances;
4. Accept and promote athletes' personal goals and refer to other coaches and sports specialists as opportunities arise;
5. Communicate and cooperate with the parents/guardians of athletes who are minors and involve them in decisions pertaining to their child's development;
6. Consider the academic pressures placed on student-athletes and conduct practices and events in a manner that supports academic success.

Athletes who have been selected to be a representative of ABBOTSFORD FALCONS will have an additional responsibility to:

1. Report any medical problems in a timely fashion, where such problems may limit the athlete's ability to train or compete;
2. Participate in all competitions, events or projects to which the athlete has made a commitment;
3. Adhere to ABBOTSFORD FALCONS requirements regarding clothing and equipment.

Player: _____

Parent or Guardian: _____ Date: _____

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Parent or Guardian: _____ Date: _____

Registration Checklist

Required Cheques (registration may be paid cash)

- | | | |
|----------------------------|---|--------------------------|
| (a) Registration Fees | \$59 Insurance (All athletes) | <input type="checkbox"/> |
| | \$150 spring flag | <input type="checkbox"/> |
| | \$200 spring/fall tackle | <input type="checkbox"/> |
| | \$50 fall flag | <input type="checkbox"/> |
| (b) Volunteer Deposit | \$200.00 – Post-dated: Dec 1/20 | <input type="checkbox"/> |
| **Must volunteer 4 times | - cash cheque in lieu of volunteering | Initial _____ |
| (c) Fundraising Deposit | \$50 Spring (Dated Jun 1/20), \$100 Fall (Dated Sep 1/20) | <input type="checkbox"/> |
| **Must sell raffle tickets | - cash cheque in lieu of fundraising | Initial _____ |
| (d) Equipment Deposit | \$500.00 – Post-dated: Jun 1/20, (Spring) Dec 1/20 (Fall) | <input type="checkbox"/> |

No equipment will be issued out until all cheques have been received

- ❖ All cheques should be made out to: **AFFA** -\$25 fee is charged for NSF cheques-
- ❖ DO NOT COMBINE AMOUNTS INTO ONE CHEQUE. Please write separate cheques for each deposit.

Financial Assistance

If you have applied for financial assistance through an organization such as KidSport, Jumpstart or Athletes for Kids. Please write the organization name & the date of application below if you have made an application. Please note, you are entirely responsible for any difference between any financial assistance received & the registration fee. Please email falconsexec@outlook.com that you have applied for Financial Assistance.

_____	_____
Organization	Date

Required Signed Forms

- | | |
|---|--------------------------|
| Parent and Player Consent & Parent Wavier | <input type="checkbox"/> |
| Abbotsford Falcons Code of Conduct | <input type="checkbox"/> |
| BCCFA Concussion Form | <input type="checkbox"/> |
| Medical History and Emergencies | <input type="checkbox"/> |

Attached Photocopies of Identification Documents (Required for ALL Registrants)
(Can be emailed to falconsregistrar@outlook.com)

- | | |
|-------------------------------|--------------------------|
| Birth Certificate or Passport | <input type="checkbox"/> |
|-------------------------------|--------------------------|

GIVE THIS SHEET TO PARENT FOR RECORDS

**YOUR CHILD WILL NOT BE ADDED TO REGISTERED LIST UNTIL ALL
DOCUMENTATION AND CHEQUES ARE RECEIVED!!!!!!**