



ASSOCIATION			
	ASSOCIATION NAME		
	DIVISION OF PLAY - TEAM NAME		
	PARTICIPANT NAME		
	<div>_____</div> <div><b>JERSEY #</b></div>	<div>_____</div> <div><b>Grade</b></div>	<div>_____</div> <div><b>AGE (7/31)</b></div>
	PARTICIPANT PARENT/GUARDIAN NAME		
<div>HOME PHONE</div> <div>WORK PHONE</div> <div>CELL PHONE</div>			

PLACE PHOTO / DMV / MILITARY ID CARD HERE

**I, Hereby, With My Signature, Do Certify That The Information Below Has Been Collected And Verified By The Means, As A Minimum, As Instructed In The AYF National Rulebook And/Or Operations Manual, Current Version.**

Conference Verification Signature/STAMP		OFFICIAL PLAYER CERTIFICATION		Association Verification Signature/STAMP			
		LEAGUE USE ONLY					
DATE OF BIRTH:	Age As of 7/31	GRADE / AGE CERTIFICATION	PARTICIPANT CONTRACT	MEDICAL CLEARANCE	WAIVER/ RELEASE	EMERGENCY MEDICAL / CONSENT	SCHOLASTICS
Month / Day / Year							

		GAME DATE	PLAYER CHECK	CODE			GAME DATE	PLAYER CHECK	CODE
REGULAR SEASON	JAMBOREE					Week 11			
	Week 1					Week 12			
	Week 2					Week 13			
	Week 3					Week 14			
	Week 4					Week 15			
	Week 5					Week 16			
	Week 6					Week 17			
	Week 7					Week 18			
	Week 8					Week 19			
	Week 9					Week 20			
	Week 10					Week 21			
						POST SEASON			

INSTRUCTIONS: PLAYER CHECK Will Enter Date, Verify The Identity, Of Each Participant, Initial Each Participant Card,  
CODE: OK = Everything Verified, I = Sick/Injured, A = Absent / Dropped

**ALL MUST BE CHECKED IN / VERIFIED PLAYING OR NOT / ENTER DETAIL UNDER 'CODE '**