

ROWLAND HEIGHTS RAIDERS

2017 FOOTBALL APPLICATION

Tackle Football Registration Fee: \$280.00 (\$325.00 after June 30th). This includes "Spirit Pack" (items that belong to the player) and includes use of all football equipment and pads, equipment refurbishing costs, school field use fees and Conference registration and use fees.

Flag Football Registration Fee: \$180.00 (\$200.00 after June 30th). This also includes: "Spirit Pack" (items that belong to the player) and includes use of all football equipment, city use fees, school field use fees, and Conference registration and use

Service Fee: \$75.00. Each Participant is also required to provide a **second** check for \$75.00 for Service Fee. This check will not be cashed. As explained below, parents are required to provide minimal volunteer services during the season. If services are not provided, the service deposit is forfeit and check will be cashed. If services are provided, the \$75.00 check will be returned after the season.

☐ Returning Raider Player. ☐ New Applicant. ☐ Cut Contract from other OJAA franchise _____

Player's **Accurate** Weight (MANDATORY): _____ Player's Age (as of 7/31/17): _____

Select Division

☐ Jr. Gremlin (Flag) ☐ Gremlin ☐ Jr. Pee Wee ☐ Pee Wee ☐ Jr. Midget

See the attached Eligibility Chart to determine the appropriate division.

Note that it is the **parent's responsibility** to enroll the player in the appropriate division.

Player Information

(Please print legibly. The Raiders generally utilize email for notification purposes.)

Full Name: _____ D.O.B.: _____

Address: _____

City & Zip _____ Home Phone: _____

Mother's Preferred Email Address: _____

Father's Preferred Email Address: _____

Player's Primary Resident is with ☐ Mother and Father, ☐ Mother only, ☐ Father only. ☐ Other _____

School Information for September 2017 (Mandatory)

School Name: _____ Phone: _____

School Address: _____ City & Zip: _____

Grade Player will be entering in September of 2017: _____ GPA (end of 2017 school year): _____

Parental Information

Father's Name: _____ Father's Work Phone: _____

Father's Home Phone: _____ Father's Cell Phone: _____

Father's Work Email Address: _____

Father's Home Email Address: _____

Mother's Full Name: _____ Mother's Work Phone: _____

Mother's Home Phone: _____ Mother's Cell Phone: _____

Mother's Work Email Address: _____

Mother's Home Email Address: _____

Insurance Information

Health Insurance Company: _____ Policy # _____

Phone Number: _____ Group # _____

Parents Must Read & Initial The Following

By checking the appropriate box and initialing where indicated, you are acknowledging that you have **read**, **understand**, and **consent** to each provision in this agreement. The Raiders will **not** accept any application unless all boxes have been checked and initialed.

Material to Be Provided: I understand that prior to the commencement of the 2017 season I will be required to furnish: (1) an original birth certificate (or passport) for all new players; (2) an original report card for June/4th Quarter 2017; and (3) copy (front and back) of players' health insurance card. The birth certificate and report card will be returned prior to the commencement of the season in September following the participant's Certification and the issuance of Identification Cards by Conference.

Parent's initials: _____

Minimum Volunteer Obligations: I understand that Raider parents or guardians are expected to work **a minimum** of one three-hour shift per year at one home game **per enrolled participant**. I have been advised that the date and type of service (snack bar, set-up, clean-up, security, etc.) will be assigned by my Head A.D, and if I have a conflict with my assigned game duty it is **my** obligation to notify my Head A.D. **at least one** week prior to the assigned game and to arrange make-up work. I understand that volunteer obligations normally will be scheduled approximately two hours before my child's game or event and that, if I want to volunteer during my child's event it is incumbent on me to so advise my team's AD. **I understand that failure to comply with volunteer duties will result in a forfeiture of my \$75.00 deposit.**

Parent's initials: _____

Conference: I understand that the Rowland Heights Raiders is part of the Orange County Jr. All American Football Conference, Inc. ("Conference"), and that it is required to abide by the rules and regulations of that organization. I understand that Conference requires that I read and signed the Adult Code of Conduct that is

attached to this form, and that I agree to comply with these requirements. I understand that a violation of the Adult Code of Conduct could subject me to discipline including expulsion from the Rowland Heights Raiders.

Parent's initials: _____

Certification Day: I have been advised that Certification Day for the 2017 football season has been set for **August 19, 2017**. The location and attendance time will be announced after the season begins. On Certification Day all potential participants' information, including academic records, is reviewed. All football teams are mustered and the potential participants officially weighed. If my child's weight falls within the appropriate guidelines and all his or her paperwork is in order, my child will be "certified" by Conference to play during the season. Following Certification Day only those participants who have been certified by Conference may continue to practice with their respective teams. **I understand that attendance at Certification is critical.** If my child does not attend Certification Day or fails to certify he or she may not be eligible to participate.

Parent's initials: _____

Cuts: I understand all Raider **tackle** football teams are **limited to 33** players on the final team roster as of Certification Day. I also understand that each squad may recruit **a total of 40 players** per squad before the beginning of the practice season. I have been advised that some squads do not recruit a full roster of players, and several players often drop for a variety of reasons. There remains the possibility, however, that cuts must be necessary to reduce a roster to 33 players prior to Certification Day and my child may be cut from the team. I understand that the decision to cut rests in the sole discretion of the team's coaching staff and Raider Executive Board, but that the **following factors are considered critical in determining cuts:** (1) safety issues; (2) attendance at all practice sessions; (3) attitude and respect toward the coaching staff and other players; (4) following instructions; and (5) whether the participant has other siblings in the program. Good football skills **are not a determining factor for cuts.**

Parent's Initials _____

Safety Concerns: Youth football is often the first opportunity for children to participate in contact sports. It is normal, particularly with younger players, to display some initial reluctance to physical contact. The Raider coaches attempt to introduce players slowly into the tackling and contact drills, utilizing methods approved by U.S.A. Heads Up Football. The Raider coaching staffs have been advised, however, to be sensitive towards those players who display a continued reluctance to participate in contact drills as these children **are more apt to be injured**. Further, the coaches realize that a player who does not enjoy contact will not enjoy his or her football experience and will be less likely to play football again. I understand that if my child displays these characteristics, a coach will make a reasonable attempt to discuss it with me and with my child. I understand that if my child continues to display a reluctance to participate in contact drills and the coaching staff makes the determination that this constitutes a safety concern, my child will be asked to withdraw from the program for safety reasons and, if I refuse my child will be cut from the program.

Parent's Initials: _____

Concussions: I understand that the Rowland Heights Raiders Conference is concerned above all by player health and safety. I represent that my child has never, to my knowledge, suffered a concussion or has received medical treatment for a head injury. (If your child has suffered a prior concussion or head injury, medical clearance may be required to participate.)

Parent's initials: _____

Grades: I am aware that Conference mandates that any player or cheerleader be required to maintain at least a **2.0 GPA** throughout the school year. Grades are checked at the beginning of each season and again during October. Conference and/or the Raiders may also randomly check grades during the season. I agree to assist Conference and the Raiders and I will not withhold any requested academic information. I also agree not to alter or in any way attempt to deceive Conference or the Raiders as to my child's academic records or information. I will timely assist in obtaining any necessary information from my child's school to comply with this requirement. I have been advised that academic falsifications or alterations will result in my child's immediate dismissal from the program and could also result in being banned from any team in Conference the following season. I have also been advised that academic falsifications or alterations could result in severe sanctions against the team on which my child participates. If, at any time, my child's grades fall below the required GPA, or I refuse to allow Conference or the Raiders reasonable access to academic information, I understand that my child will be ineligible to continue to participate.

Parent's Initials: _____

Age & Weight: I understand that a player's placement on a team is based on a combination of playing age (calculated as of 7/31/17) and weight. As part of this application, I have been provided with the "Eligibility Information" that specifically identifies these age and weight requirements. I understand that Conference issues these rules for safety and insurance purposes and that the Raiders have no control whatsoever over these requirements. I understand that these requirements **may not be waived or altered regardless of any extenuating circumstances**. I understand that it is **my responsibility** to enroll my child in the appropriate division based on age and weight.

Parent's Initials: _____

Registration Fee: I understand that the entire amount of the registration fee is due and owing at the time this application is submitted. However, I understand that if I register my child with the Raiders prior to **May 25, 2017**, I may submit the completed registration form along with a check in the amount of .the registration fee, and that the Raiders will hold a position on the Division roster for my child. I agree to pay the balance owed prior to **July 1, 2017**. I understand that if I fail to pay the full amount of the remaining balance by **July 1, 2017**, my child may be precluded from participating.

Parent's Initials: _____

Movement of Players Between Weight Divisions: During the first day of practice, if the Raiders determine that my child is more than **6 lbs above or 6 lbs below** the designated weight requirement in the division in which my child is enrolled, I consent to allow the Raiders to move my child to another division within the Raiders organization assuming such a position on another roster is available. I understand that the Raiders may do this only **if** there is currently room available on that Raiders squad. This decision rests within the sole discretion of the Raider coaches and the Raider Executive Board. If, at the time this determination is made, I refuse to consent to move my child to another team or there is not space on another team, I understand that my child will not be permitted to participate.

Parent's initials: _____

Geographical Location: I have been advised that Conference rules require that all players on the Raiders be located within its recruiting area or in an "open" area (an area that does not have another Franchise that is a member of Conference). I understand that if I reside in an area that falls within another franchise, I will need permission from that franchise and Conference to play for the Raiders. I understand that it is my responsibility to obtain all necessary waivers and paperwork.

Parent's Initials: _____

Raider Refund Policy: Prior to the first football practice of any season, if I withdraw my child from the Raider program I am entitled to a full refund less \$75.00 administration fee upon timely return of all Raider owned equipment previously issued to the participant. After the commencement of the football practice or August 1st, 2017, whichever occurs first, I understand that I am entitled to a refund only if **specifically provided for in this application.**

Injury/Weight/Certification Requirements: If my child is injured and cannot continue with the program prior to Certification Day, or fails to meet the appropriate weight or certification requirements prior to Certification Day, I am entitled to a full refund less a \$75-dollar administration fee upon timely return of all Raider owned equipment previously issued to the participant. If this occurs **after** Certification Day, I understand that I am not entitled to a refund.

Cuts: If my child is cut in order to reduce the roster to 33 players prior to Certification Day, I am entitled to a full refund less a \$75-dollar administration fee upon timely return of any Raider owned equipment previously issued to the participant.

Personality Incompatibility: I understand that the Raider Board, staff and coaches are all unpaid volunteers. I also understand that sometimes disagreements arise between parents and youth sports coaches over a variety of issues. I understand that the **Raiders will not issue any refund whatsoever** if I withdraw my child from the program due to personality or other disputes as between or among my child's coach, myself and/or the Raider Executive Board.

Academics: The Raiders and Jr. All American Football place a premium on academics. Participation in youth sports is a privilege, not a right. If, at any time during the season, my child's grades fall below 2.0 then my child will not be permitted to continue with the program and **I will not be entitled to any refund.**

Parental Misconduct: If I am asked to leave the program at any time for misconduct, including, but not limited to, a violation of the Adult Code of Conduct, **I will not be entitled to any refund.**

Discipline: One of the purposes of youth sports is to instill a sense of order and discipline. I understand that if my child is unruly or excessively disruptive to the point that it interferes with the orderly conduct of the team or cheer squad, my child's coach will first discuss this with me. If my child's conduct does not thereafter improve, he may be asked to leave the team. I understand that if this occurs, **I will not be entitled to any refund.**

Post-Certification: After Certification Day, if my child voluntarily withdraws from the program for **any** reason, including, but not limited to, a failure to maintain the required GPA, injury after Certification Day or my refusal to consent to move my child to another team within the Raiders because of weight problems, or dispute with the Raider organization or any member thereof, then **I am not entitled to any refund.**

Payment of Refunds: All refunds will be paid within thirty (30) days of the date upon which the participant returns all Raider owned equipment previously issued to the participant. Failure to return all Raider equipment within two weeks of leaving the program **negates my right to any refund.**

Return of Equipment: One of the largest yearly expenses of the Raider organization consists of the costs to replace equipment that is not returned. I understand that, regardless of any refund to which I may be entitled, I am responsible for returning to the organization in good condition all Raider-owned equipment issued to my child. I understand that I will be financially responsible to the Raider organization for all equipment that I fail to return.

Parent's Initials: _____

Carls Jr Books: While the Raiders strive to balance minimal fundraising obligations with registration fees, I understand that each season the Raiders pay a significant sum towards field and facilities maintenance, lights, equipment purchase and refurbishing, etc. I am aware that the Raiders sole fundraising source is a Carls Jr Book. I understand that each enrolled player or cheerleader will be expected to sell or purchase a minimum of five (5) Carl's Jr Coupon Books.

Parent's Initials: _____

Raider Emphasis on Scholastics and Sportsmanship: I understand that during playoffs, which typically occur during the first three weeks in November, Conference honors scholarship and sportsmanship award winners from each team. These ceremonies require the recipients **to attend in person** to receive their respective award(s). I understand attendance is **mandatory** at these functions. I understand that the Raider Organization strongly emphasizes both sportsmanship and academics, and encourages parents and players to do likewise. I acknowledge that good character and scholastic achievement are both far more important than any transitory success in youth sports. I understand this commitment and will make every effort to attend these functions with my child if he or she is a recipient of a scholastic or sportsmanship award.

Parent's initials: _____

Conduct: It is unfortunate that parental and fan conduct has become an issue of great concern in all youth sports. The Raider program has implemented a no-tolerance policy toward player and parental misconduct. I pledge to conduct myself respectfully towards all members of the Raider program, including other parents, coaches, board members, players, and participants. If I have any issue or problem with a coach, parent or board member, I will conduct myself with courtesy in trying to resolve any problems. I understand that if I violate this rule, my child will be removed from the program and no refund will be issued.

Parent's initials: _____

Misuse of Team Email Addresses. The Raider organization makes use of emails addresses and other semiprivate information to communicate with parents, coaches, officials, and Conference. I understand that I will be privy to some of this information and agree not to utilize such information for purposes other than Raider related events.

Parent's initials: _____

Parents Must Read & Sign The Following General Release of Liability

I acknowledge that I am fully aware of the potential dangers of participation in flag or tackle football and I fully understand that participation in football may result in **SERIOUS INJURIES, PARALYSIS, PERMANENT DISABILITY AND/OR DEATH to**

_____ [please write participant's name here]. I fully
knowledge and understand that protective equipment does not prevent all participant injuries.

Parent Signature_____ Parent Signature_____

Print name here: _____ Print Name here:_____

I do hereby forever **DISCHARGE, WAVE, RELEASE, ABSOLVE, INDEMNIFY, AND AGREE TO HOLD HARMLESS Orange County Jr. All American Football, the Rowland Heights Raiders, and any and all other franchises, organizers, sponsors, supervisors, administrators, officers, directors, staff, referees, participants, and persons transporting the above named participants to and from activities, from any claim arising out of any injury to myself and/or** _____ [please write participant's here].

Parent Signature_____ Parent Signature_____

Print name here: _____ Print Name here: _____

Parental Participation Information

To make our program a success adult supervision and assistance is vital. In fact, without parental volunteers the program simply could not operate. We understand that most parents are very busy and may not have significant time to volunteer. We can work with you and find something for you to do that will comport with your work and family schedule. If you are interested in participating in the Raider program alongside your child, please let us know by contacting our President, Herman Esquivel at rrpwprez@gmail.com or by calling at 626-465-6063.