



**Everest Youth Football League, Inc.**  
**R11561 Eau Claire Dr.**  
**Ringle, WI 54471**

Registration # : \_\_\_\_\_

Date Submitted: \_\_\_\_\_

\* This is the only form due for registration. All other forms need to be handed in to your child's coach at their first team meeting

**Player Information / Main Contact Information:**

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Grade This Fall: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_ Primary Contact E-Mail: \_\_\_\_\_

Official Weight: \_\_\_\_\_

EYFL Board Member's Initials: \_\_\_\_\_

First Year Player (Playing Fee, New Jersey, New Pants) **\$ 135.00**

**Complete grey box only if you played in EYFL last year.**

<input type="checkbox"/> Second Year Player	Playing Fee <b>\$ 90.00</b>	Team Color: _____
<input type="checkbox"/> New Jersey Needed <b>\$ 20.00</b>	If not, jersey number last year: _____	
<input type="checkbox"/> New Pants Needed <b>\$ 25.00</b>	Pant Size (if needed): _____	

**\*\* Total Due \$** \_\_\_\_\_ Check/Receipt # : \_\_\_\_\_

\*\* No refunds after equipment handout  Paid In Full EYFL Board Member's Initials: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

**Parent/Guardian Information:**

**Father**

**Mother**

Name: _____	_____
<input type="checkbox"/> Check if Father's address is same as player's above	<input type="checkbox"/> Check if Mother's address is same as player's above
Address: _____	_____
City: _____	_____
Zip: _____	_____
Phone(s) Home: (____) _____	(____) _____
Cell: (____) _____	(____) _____
Work: (____) _____	(____) _____
E-Mail: _____	_____

I will volunteer as: \_\_\_\_\_ Head Coach (if needed) \_\_\_\_\_ Head Coach (if needed)

\_\_\_\_\_ Assistant Coach \_\_\_\_\_ Assistant Coach

Or Or

\_\_\_\_\_ Parents Committee Member \_\_\_\_\_ Parents Committee Member

I have been an EYFL coach in the past and have so coached for \_\_\_\_\_ years.

I have been an EYFL team parent volunteer in the past and have so volunteered for \_\_\_\_\_ years.