

Team: KINGSTON Jersey Number: _____

WVJFC USE ONLY: FORM COMPLETE | BIRTH CERTIFICATE | PHYSICAL
 6U-Team 5 & 6 yr old 8U-Team 7 & 8 yr old 10U-Team 9 & 10 yr old 12U-Team 11 & 12 yr old

2025 WYOMING VALLEY JR. FOOTBALL CONFERENCE INC. OFFICIAL REGISTRATION FORM

COPIES OF THE PARTICIPANT'S BIRTH CERTIFICATE AND MEDICAL CLEARANCE ARE REQUIRED PRIOR TO ANY ACTIVITY.

Participant First Name: _____ Middle Initial: _____ Last Name: _____ Suffix: _____

Date of Birth: Age on August 1, 2025: Football Cheerleading

Street Address: _____ City, State and Zip Code: _____

Guardian 1 Full Name: _____ Relationship to Participant: _____

Email Address: _____ Cell Phone Number: _____

Guardian 2 Full Name: _____ Relationship to Participant: _____

Email Address: _____ Cell Phone Number: _____

In case of an emergency, the name and number to call is:

Please answer the following questions. Within the past year has the participant been treated for any of the following?

	Please check below	If the answer is <input checked="" type="checkbox"/> Yes, then you must give an explanation below.
Asthma	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Concussion	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Hernia	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Knee Injury	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Joint Injury	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Heat Exhaustion	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Dizziness	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Fainting Spells	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Shortness of Breath	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Broken Bones	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Neck Injury	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Head Injury	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Allergies	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Epileptic Seizures	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Diabetes	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Heart Conditions	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the participant currently take medication(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the participant currently wear eyeglasses?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the participant currently wear contact lenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Having been informed of the organization, the WVJFC Inc., to provide supervised activities during the season, I do assume all the risk and hazards incidental to the conduct of the activity, and I do further release, absolve, indemnify, and hold harmless the WVJFC Inc., the organizers, sponsors, or any of the supervisors appointed by them. I likewise release responsibility to any person transporting my child to and from an activity. As the guardian, I will furnish, upon request of the conference by-laws, a certified copy of the birth certificate of the above-named candidate and current sports physical. The Insurance that the Wy Inc., carries is only secondary insurance. Please be advised that your Family Insurance is the Primary Insurance Coverage in case of Injury.

Please select the correct box and confirm with your initials: My Child IS / IS NOT covered by Health Insurance. Initials: _____

Insurance Carrier: _____ Insurance Plan: _____ Insurance Group #: _____

Hospital of choice in non-emergency treatment is: _____ In case of emergency, injured party will be taken to nearest hospital.

I agree to the above and affirm that the above answers are accurate and represent an overall general state of my child's health. In the event of injury to my child, I hereby give the ambulance association, any licensed care provider or facility, permission to treat my child, and to do all and anything that is medically necessary for the treatment of my child including transportation to the nearest hospital for emergency treatment and any and all treatment that is necessary.

ATTENTION ALL PARENTS, GUARDIANS AND FANS.

IF A FAN(S) BECOME(S) UNRULY OR DISRUPTIVE DURING A WYOMING VALLEY JUNIOR FOOTBALL CONFERENCE INC GAME, THE GAME WILL BE STOPPED UNTIL THE FAN(S) CALM DOWN OR ARE REMOVED. IF THE FAN(S) DO NOT CALM DOWN OR RESIST REMOVAL FROM THE VENUE, THE LEAGUE OFFICIAL HAS THE AUTHORITY TO TERMINATE THE GAME.

Parent/Guardian Signature: _____ Date: _____



PARENT-ATHLETE CODE OF CONDUCT

I understand that the purpose of the **Kingston Huskies Football & Cheer Organization (KHFCO)** is to provide a wholesome athletic environment that inspires the youth (regardless of race, creed, color, or sex) of Kingston, or any areas considered open territory, to practice the ideals of good character, sportsmanship, teamwork, mental and physical health, healthy competition and strive to be "the best that they can be."

We emphasize sportsmanship, teamwork, and respect for authority figures (Directors, Coaches, and Game Officials). Our focus is on developing good life skills through the sport of football. KHFCO will not tolerate verbal or physical abuse of its volunteer coaches, referees, or players from any Parent, Player, or Spectator. Spectator, as well as the players and coaches, are expected to abide by the code of conduct described here at all KHFCO and WVJFC events. While most of the adults and children in the program will abide by this code without being instructed, it being published to protect the children, the integrity of our program, and emphasize the values of KHFCO. ****Please note: All spectators are held to the same Code of Conduct regardless of their signing. Please reference Article III, Section B: Spectator Code in the organization's by-laws.**

PARENT'S CODE OF CONDUCT

1. I will teach my child that doing one's best is more important than any other outcome. I will teach my child not to feel bad about any ending result that may have happened.
2. I will encourage my child to participate by the rules and to resolve conflicts without resorting to hostility or violence.
3. I will praise my child for trying hard and competing fairly, and make my child feel like a winner every time.
4. I will never ridicule or yell at my child, other participants, coaches or officials. I will cheer for everyone and avoid booing at all costs. I will even acknowledge other participants when they have done well.
5. I will respect and show appreciation for the volunteer directors, coaches and officials who give their time to my child.
6. I will not assist the coach by yelling instructions at participants unless asked by the coach.
7. I will remember that these participants are amateurs that cannot be judged by the standards of a professional team.
8. I understand that all officials do their utmost to be impartial; they try their best to provide a safe and suitable framework so that the game is well played, and I will respect their decisions.
9. I will not question any official's calls, bias or judgment.
10. I will show respect for any opponents, because without them there would be no game.
11. I will not use profanity, nor will I harass any participants, coaches, officials, or other spectators.
12. I will remember that my child participates in sports for his/her enjoyment and not mine.
13. I will refrain from the use of any tobacco product, or alcoholic product while at a game or practice.
14. I will not use/represent the Kingston Huskies Football & Cheer Organization or its logos in any reproduction without the consent of the Executive Board.
15. I understand that I will be personally held accountable due my negligent behavior, and ignorance of team/league policies. Such accountability can come in the form of fines, game suspensions or team/league removal depending on the severity of the action. **Any fines incurred due to your actions will be your responsibility.*

Print Name: _____ Relationship to Athlete: _____
 Signature: _____ Date: _____

PARTICIPANT'S CODE OF CONDUCT

1. I will abide by the rules of the activity I represent.
2. I will participate in every game and every practice except for illness, injury, homework, or school events.
3. If I must miss a game or practice, I will contact the team coach as soon as possible.
4. School shall take precedence over any sports related activity. I will study hard.
5. I will not use foul language towards teammates, coaches, officials, or others I may compete against.
6. I will not be critical of teammates and never discuss teammate's abilities except to encourage good teamwork.
7. I will ensure my uniform and my other gear is complete, safe, and in good condition at all times.
8. I understand that I am on a team and will be a team player.
9. In any competitive aspect of my activity, I understand that winning isn't always important. Doing my best always is important.
10. I will thank my teammates for their efforts.
11. I will listen to my coaches' instructions.
12. I know I represent the game of football either as a player or as a cheerleader. I further know that I represent my family, my team, and the Kingston Huskies Football & Cheer Organization.
13. I will always conduct myself in a dignified manner when in the company of my team.

Name of Participant: _____ Age: _____ M F
 Football Cheerleading Age Level: 6U 8U 10U 12U Season Effective: 2025
 Signature: _____ Date: _____

BULLYING & SOCIAL MEDIA POLICY



Kingston Huskies Football & Cheer Organization is committed to providing a physically and emotionally safe environment for all our participants so they can play football and cheer in a secure atmosphere. Bullying/teasing of any kind is unacceptable on or off the field. This includes behavior during team related activities (e.g. practices and games) as well as interactions outside these activities. It also includes mean-spirited comments through texts and posts on social media. All players will be held accountable for their actions on and off the field and are responsible for reporting bullying to their coach.

What is teasing and bullying?

Teasing and bullying are deliberately hurtful behaviors, where it is difficult for those being bullied to defend themselves. The three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. name calling, intimidating, racist remarks) or indirect (e.g. spreading rumors, ignoring, excluding). Additionally, taunts or insults on social media are considered bullying.

Kingston Huskies F&C Organization Teasing/Bullying Procedures

This policy will be communicated to participants and parents at the beginning of each season. Kingston Huskies F&C Organization will take all reports and concerns seriously and attempt to stop the behavior.

If teasing or bullying behavior occurs, it will be:

- Investigated by a member of the team’s coaching staff.
- Addressed by the head coach with the participant.
- Communicated to the parent.
- Depending on severity, it may be reported to the Kingston Huskies F&C Organization Executive Board.
- ***Disciplinary actions will vary depending on the severity and frequency of the bullying incident(s). With approval of the Kingston Huskies F&C Organization Executive Board it may result in removal from the organization and recommendation to the Wyoming Valley Junior Football Conference for removal from the league.***

Social Media Policy

Athletes, parents and coaches are expected to follow the same rules for good behavior and respectful conduct online as offline. Athletes and coaches are representing Kingston Huskies F&C Organization at all times. They should use good judgement when posting comments and images online. They should be particularly mindful with images that include Kingston Huskies F&C apparel or uniforms. Misuse of social media can result in disciplinary action.

Player: I accept responsibility for my words, actions, texts and social media posts including images. I acknowledge that all forms of bullying must be reported to my coach.

Player’s Name (PRINT)

Player’s Signature

Date

Parent/Guardian: I have read the Kingston Huskies Football & Cheer Organization Bullying & Social Media Policy. I understand that my child may be subject to disciplinary actions by the coaches and the league if they or myself are involved in bullying or the misuse of social media.

Parent/Guardian Name (PRINT)

Parent/Guardian Signature

Date



**WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19
ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT**

In consideration of being allowed to participate with the Kingston Huskies Football & Cheer Organization, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Kingston Huskies Youth Football & Cheer Organization, Wyoming Valley Junior Football Conference and the Municipality of Kingston their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (“RELEASEES”), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of Participant: _____ Age: _____ M F
 Football Cheerleading Age Level: 6U 8U 10U 12U Season Effective: 2025

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Print Name: _____ Relationship to Athlete: _____

Signature: _____ Date: _____