



American Youth Football, Inc. & American Youth Cheer



2012 Membership Application

All Charges are "Per Team" or "Per Squad"

Please Print Or Type – Use Black Ink

Our Organization, _____, _____,

Name of Your Organization

wishes to apply for membership with AMERICAN YOUTH FOOTBALL, INC. and/or AMERICAN YOUTH CHEER.

Please select your league structure type: (check one of the below options). THIS IS REQUIRED.

LOCAL MEMBERSHIP STRUCTURE: Your organization is free to play in accordance with your own locally adopted and current governing rules and by-laws, as long as your rules subscribe to the following governing principles: 1. Safety 2. Sportsmanship 3. Full Participation; these leagues are those that DO NOT fulfill requirements to participate in inter-league competition.

NATIONAL/AMERICAN MEMBERSHIP STRUCTURE: If your organization plans to participate in inter-league competition. Your organization must play in accordance with Official AYF Rules and Regulations and participate in established divisions (details at www.americanyouthfootball.com)

TACKLE FOOTBALL	# TEAMS	X	CHARGE	=	TOTAL CHARGE
Tackle Football - AGES 9 & Under		X	\$35.00	=	\$
Tackle Football - AGES 12 & Under		X	\$35.00	=	\$
Tackle Football - AGES 15 & Under		X	\$35.00	=	\$
FLAG FOOTBALL (Age 5-17)	# TEAMS	X	CHARGE	=	TOTAL CHARGE
Flag Football - ALL TEAMS (Age 5-17)		X	\$20.00	=	\$
CONTENDER - Flag Football - (Age 5-17)		X	\$20.00	=	\$
CHEER / DANCE / STEP SQUADS (Age 5-18)	# SQUADS	X	CHARGE	=	TOTAL CHARGE
Choose as many CLASSES as apply to your organization. (All Cheer classes include Contender squads)					
CLASS 1: Cheer/Dance/Step Squads Affiliated with Your Football Teams		X	\$25.00	=	\$
CONTENDER Cheer/Dance/Step Squads Affiliated With Football Teams		X	\$25.00	=	\$
CLASS 2: Cheer/Dance/Step Squads Affiliated With Your Football Teams That Will Also Participate In Competitions Other Than Local League or Official AYF Regional or National Championships (NOTE: Class 2 squads must also be Class 1 and pay the fee under Class 1.)		X	No Charge	=	No Charge
CLASS 3: Cheer/Dance/Step Squads Not Affiliated With Your Football Teams (Independent Cheer Squads).		X	\$25.00	=	\$
TOTAL PAYMENT DUE:					\$

PLEASE NOTE: Membership fees outlined on this paper application are higher than the rates on the [Online Membership Application](http://www.joinayf.com) due to administrative fees. FOR ONLINE RATES & MEMBERSHIP APPLICATION PLEASE VISIT: www.joinayf.com.

Our check made payable to AMERICAN YOUTH FOOTBALL, INC., is enclosed.

MAIL FORM TO:

American Youth Football, c/o Sadler & Company, Inc., PO Box 5866, Columbia, SC 29250.

Note: Please write a separate check payable to American Youth Football for the Membership Fee.

Writing one check for the Membership Fee and the Insurance Charges will delay processing.

WE, the duly elected and authorized officers of the above named organization agree that in consideration of the granting of membership, we shall be bound by the terms and conditions set forth in the current American Youth Football Terms of Membership And Service Agreement, incorporated herein by reference, which can be found at: <http://www.myayf.com/tos.htm>



Signature Required

Signature

Title

Date

ORGANIZATION CONTACT PERSON:

Mailing Address (No PO Box):

City: _____ State: _____ Zip: _____

Home Phone: () _____ Daytime Phone: () _____

Fax #: () _____ Email: _____

ORGANIZATION WEBSITE:

Please use reverse side to list officers of the League



AYF / AYC - ORGANIZATION OFFICERS

(Required Form – Make Additional Copies As Needed)



ORGANIZATION NAME:

PRESIDENT:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email:	

VICE-PRESIDENT:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email:	

SECRETARY:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email:	

TREASURER:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email:	

CHEER DIRECTOR:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email:	

AYF Mandatory Requirement Notice:

To be a member in ‘good standing’ and in order **to be ELIGIBLE for many AYF Services**, including: 501(c)(3) status, grants, donations, regional/national competitions and more, Rosters must be entered electronically at www.myayf.com by the mandatory due dates. You can access the control panel with your user ID (which will be forwarded to you via email).

One Contact per Team is due by August 1st, and TEAM rosters are due October 1st.
(Rosters will not be made available to parties outside American Youth Football.)

Send this form and accompanying check for membership fee along with your insurance application to:
American Youth Football, c/o Sadler & Company, Inc., PO Box 5866, Columbia, SC 29250-5866.

Note:

Please write a separate check payable to American Youth Football for the Membership Fee.
Writing one check for the Membership Fee and the Insurance Charges can delay processing.



AYF / AYC ROSTER OF FOOTBALL COACHES

(Required Form – Make Additional Copies As Needed)

**ORGANIZATION NAME:****ORGANIZATION CONTACT PERSON:**

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	Fax #: ()
Email:	Website:	

FOOTBALL COACH (Name):

Number years experience either as a FORMER PARTICIPANT and/or as a COACH:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email::	

FOOTBALL COACH (Name):

Number years experience either as a FORMER PARTICIPANT and/or as a COACH:

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Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email::	



AYF / AYC ROSTER OF CHEER COACHES



(Required Form – Make Additional Copies As Needed)

ORGANIZATION NAME:

ORGANIZATION CONTACT PERSON:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	Fax #: ()
Email:	Website:	

CHEER COACH (Name):

Number years experience either as a FORMER PARTICIPANT and/or as a COACH:

Mailing Address (No PO Box):

City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()	
Fax #: ()	Email::	

CHEER COACH (Name):

Number years experience either as a FORMER PARTICIPANT and/or as a COACH:

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