

# **ROCHESTER FOOTBALL & CHEER**



## **2021 REGISTRATION PACKET**

# FOOTBALL & CHEER REGISTRATION CHECKLIST

**These items will be completed & electronically signed with your online registration by March 21, 2021**

- ☐ **Registration & Payment** Complete online registration with a credit card or debit payment. Any questions regarding payment, please contact [rochesterfootballandcheer@gmail.com](mailto:rochesterfootballandcheer@gmail.com).
- ☐ **Volunteer Agreement Form** (p. 12) must be read as part of online registration and agreed to upon completion of the process. ***Deposit check due at Equipment Handout on June 5, 2021.***
- ☐ **Equipment Agreement** (p. 13) must be read as part of online registration and agreed upon completion of the online process. ***Deposit check due at Equipment Handout on June 5, 2021***
- ☐ **Code of Conduct & Agreement** (p. 14-16) must be read as part of online registration and agreed to upon completing the online or registration process.
- ☐ **Concussion Form** (pg 17-18) must be read and agreed to upon completion of the online process

**The following must be turned in at Equipment Handout on June 5, 2021:**

- ☐ **Birth Certificate** at Equipment Handout on June 5, 2021 - *new players/cheerleaders only.*
- ☐ **Equipment Deposit Check-** \$300 made out to Rochester Football, Inc. to be cashed only if the equipment isn't returned at Equipment Hand-in on November 13, 2021. There is a \$35 fee for all returned checks. Please **postdate the check to August 2, 2021.**
- ☐ **Volunteer Deposit Check-** \$300 made out to Rochester Football, Inc. to be cashed only if volunteer duties are not fulfilled. There is a \$35 fee for all returned checks. Please **postdate the check to August 2, 2021.**

**The following must be scanned (or picture with phone) and emailed to rochesterfootballandcheer@gmail.com RE: Physical Forms before practice begins:**

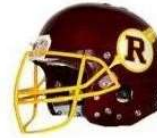
- ☐ **Physical & Medical Info Forms** (p. 8 & 9) turned in before the first practice date of 2021 (August 2, 2021).
- ☐ **Varsity Players only: Proof of grade (report card, Student ID) required before the first practice.**

**\*\* IF PHYSICAL AND CONCUSSION FORMS ARE NOT TURNED IN BEFORE THE FIRST DAY OF PRACTICE, YOUR CHILD WILL NOT BE ABLE TO PARTICIPATE IN THE FIRST PRACTICE, AND WILL BE DISQUALIFIED FROM IRON MAN/SPIRIT AWARD, NO EXCEPTIONS! EQUIPMENT WILL NOT BE HANDED OUT TO ANY PLAYER UNLESS IT IS CONFIRMED THAT EQUIPMENT DEPOSIT AND VOLUNTEER DEPOSIT CHECKS HAVE BEEN SUBMITTED. NO EXCEPTIONS!**



## **2021 ROCHESTER FOOTBALL & CHEER PROGRAMS**

- ◆ Our program prides itself in teaching and developing football and cheerleading skills and instilling discipline and commitment both on and off the field.
- ◆ Guaranteed football playing/cheerleading time, NO tryouts, NO experience is necessary.
- ◆ We offer an experienced coaching staff – **ideal football player/coach ratio approx. 4 to 1.** Coaches are required to undergo training through USA Football and are often former college football players. Safety and proper technique are our primary goals.
- ◆ We are a member of The Michigan Youth Football and Cheer Conference (MYFCC) and play a competitive schedule. Games are played on Saturday or Sunday, including eight regular-season games, plus two playoff rounds, including one super bowl. Regular practice takes place on weekday evenings.
- ◆ Football players need to purchase mandatory sundries (practice pants, practice jersey, practice shorts, game socks, undergarments with hip and tailbone pads, mouthpiece, chinstrap, etc.). **The cost averages \$75-150, and an order form is available on the website. NEW for 2021, the player jersey will be mandatory for purchase at \$88.**
- ◆ The season typically begins August 1st and may continue through the second week of November; attendance at all games and practices are essential to continue with the Rochester Football & Cheer tradition of excellence.
- ◆ Cheerleaders cheer at our football games and compete in the MYFCC League Cheer Competition.
- ◆ Cheerleaders practice basic tumbling and stunting based on their age. The VP of Cheer reserves the right to place your child on the appropriate team for his/her development.
- ◆ Please see the website for the cheer sundries order form. **Cheerleaders will have the additional costs of \$250-300 for cheer sundries (wind/bodysuit, shoes, etc.).**
- ◆ Rochester Football & Cheer is a volunteer organization. Parent/family volunteering is critical to the success of our program and is expected of every family. Volunteer activities include, but are not limited to: chain gang, spotters, announcer, action pictures, game clock, and 50/50 raffle. A volunteer deposit is required per family to ensure the fulfillment of volunteer duties. The volunteer deposit check will be returned upon completion of volunteer activities at the end of the season. If volunteer activities are not fulfilled, returning participant status may be rescinded.
- ◆ Rochester Football & Cheer requires equipment deposits for football or cheer equipment that your child uses on loan from us. An equipment deposit is required for every football player and cheerleader. The equipment deposit will be returned upon return of equipment at the end of the season.
- ◆ Rochester Football & Cheer requires everyone to abide by our Rochester Football & Cheer Code of Conduct. A signature is required as acceptance of the terms of our policies.
- ◆ Full payment is expected with online registration. Returning players are guaranteed a roster position if their registration is completed by the deadline. Returning players who have not completed their online registration by the deadline will be placed in the lottery with new applicants **(Returning players that have a 2020 credit that has not registered by the deadline will forfeit their credit)**. New applicants will be placed on a roster, space permitting, by a random lottery.
- ◆ Applicants will be notified whether or not they have been placed on the roster by **Monday, March 31, 2021.**
- ◆ All coaches, assistant coaches, unit directors, board members, etc., are required to submit a background check.



## **MOST FREQUENTLY ASKED QUESTIONS**

### **1. What is the registration refund policy?**

There is currently a No Refund Policy for registration fees once the participant is placed on the roster.

### **2. When does the season start?**

The season starts approximately August 2<sup>nd</sup>. Please plan vacations accordingly; refer to the 2021 attendance policy.

### **3. How many days a week do the football players & cheerleaders practice?**

Initially, practices are Monday through Friday from 6:00 to 8:00 p.m. Once the game schedule starts, practices are Tuesday, Wednesday, and Thursday, with a football walk-through on Friday evening or Saturday morning, with a game on Saturday or Sunday. Please note: Jr Freshman football and cheer practice three days a week in August (Tuesday, Wednesday, and Thursday), then switch after games start to practice on Tuesday and Thursday with a game on Saturday or Sunday. Please look at the schedule posted on the website; it is similar year to year and will give you a good idea of the commitment expectation. Current schedules will be added to the website as soon as teams are playing locations are verified.

### **4. Where do they practice?**

Practices take place on the fields at Musson Elementary School on Dutton Road.

Location can change depending on the availability of the fields. Cheer holds some practices at local indoor facilities, including other schools in the RCS, Flip Spot Gym, Oakland Christian School, and Deborah's Stage Door.

### **5. Do they need to be at all the practices and games?**

Every participant is expected to attend every practice and every game.

Please refer to the 2021 Attendance and Participation Policy for the details.

### **6. Where are the games played?**

Home games will be played at one of the Rochester High Schools or other local high school stadiums. Away games are played in Pontiac, Macomb County, Commerce, Plymouth, and Farmington, just to name a few.

### **7. What are the game times?**

Jr. Freshman typically starts around 10:00 a.m. or 12:00 p.m. and sometimes earlier. Freshman games generally start at 12:00 p.m., JV at 2:00 p.m., and Varsity at 4:00 p.m. Coaches require participants to arrive an hour to an hour and a half early to warm up and practice.

### **8. What other costs are there outside of the registration fee?**

Football: Mandatory sundries include practice pants, game socks, practice jersey with name on the back, colored attachable mouth guard (clear mouth guards not allowed), integrated compression girdle, chinstrap, and cleats. **The average cost is about \$75-150;** it depends on the name brand you choose to purchase. **Jersey's charge is \$88.00.** Cheer: In early June, cheerleaders will attend sundries fitting to order their clothes, shoes, etc.; for the 2021 season, **the average cost is \$250-300.** Optional items for purchase: Spirit Wear, **Yearbook (approx. \$25), and Banquet tickets (approx. \$39/per person)** are available if you choose to purchase them at registration or during the season.

### **9. Do I need to get a copy of my child's birth certificate if I am a returning player?**

No, if your child is a returning player, we still have a copy of your child's birth certificate. New football players and cheerleaders will need to turn in a copy of their child's birth certificate before the 1<sup>st</sup> day of practice.



## **2021 ROCHESTER FOOTBALL REGISTRATION**

*Please use a separate form per child, fill in all fields completely, and print clearly.*

Last Name: \_\_\_\_\_ First: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age as of 9-1-21: \_\_\_\_\_ Grade as of 9-1-21: \_\_\_\_\_ School: \_\_\_\_\_

Please check one: Returning Player \_\_\_\_\_ New Player \_\_\_\_\_

Please check: <b>FOOTBALL PROGRAM</b>			
<b>Squad</b>	<b>Age as of 9-1-21*</b>	<b>Cost</b>	
Jr. Freshman	7 – 8 years old	\$375.00	
Freshman	9–10 years old	\$425.00	
Jr. Varsity	11-12 years old	\$425.00	
Varsity	13-14 years old (All 8 <sup>th</sup> Graders will be on Varsity)	\$425.00	

### **Family Discount**

The cost for the first child per family is at the regular price. Each additional child is \$50 off.

### **Attention New Applicants**

A birth certificate will be required once your child is placed on a roster.

### **REGISTRATION FEES ARE NON-REFUNDABLE**

once your child is placed on a roster. There is a \$35 fee for all returned checks.

\*Subject to weight restrictions.

Mom Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Dad Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Do you have a returning sibling in the Rochester Football & Cheer program this year? (Please circle one) YES NO

If yes include the following: Name: \_\_\_\_\_ Squad: \_\_\_\_\_

Do you have a sibling or parent who is a Rochester Football & Cheer Alumni (2 or more years?) YES NO

If yes, include: Name: \_\_\_\_\_ Years in the Program: \_\_\_\_\_

Do you have any objections to your child's name/picture being on the internet, in the video, or in the newspaper?

YES NO Parent Signature: \_\_\_\_\_

**All Registrations must be submitted online at [www.rochesterfootballandcheer.com](http://www.rochesterfootballandcheer.com) through **March 21, 2021****



## **2021 ROCHESTER CHEER REGISTRATION**

*Please use a separate form per child, fill in all fields completely, and print clearly.*

Last Name: \_\_\_\_\_ First: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ **Grade attending 2021-2022 School Year:** \_\_\_\_\_ School: \_\_\_\_\_

Please check one: Returning Cheerleader \_\_\_\_\_ New Cheerleader \_\_\_\_\_ Cheer Alumni \_\_\_\_\_

Please check: <b>CHEER PROGRAM</b>		
<b>Squad</b>	<b>Grade as of 9-1-21 (2021-2022 School Year)</b>	<b>Cost</b>
Jr. Freshman Cheer	Grades 1-2	\$325.00
Freshman	Grades 3-4	\$355.00
Jr. Varsity	Grades 5-6	\$355.00
Varsity	Grades 7-8	\$355.00

### **Family Discount**

The cost for the first child per family is at the regular price. Each additional child is \$50 off.

### **Attention New Applicants**

A birth certificate will be required once your child is placed on a roster.

### **REGISTRATION FEES ARE NON-**

**REFUNDABLE** once your child is placed on a roster. There is a \$35 fee for all returned checks.

Mom Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Dad Name: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Do you have a returning sibling in the Rochester Football & Cheer program this year? (Please circle one) YES NO

If yes include the following: Name: \_\_\_\_\_ Squad: \_\_\_\_\_

Do you have a sibling or parent who is a Rochester Football & Cheer Alumni (2 or more years?) YES NO

If yes, include: Name: \_\_\_\_\_ Years in the Program: \_\_\_\_\_

Do you have any objections to your child's name/picture being on the internet, in the video, or in the newspaper?

YES NO Parent Signature: \_\_\_\_\_

**All Registrations must be submitted online at [www.rochesterfootballandcheer.com](http://www.rochesterfootballandcheer.com) through **March 21, 2021****



## **ROCHESTER FOOTBALL & CHEER PHYSICAL EXAM FORMS**

**PHYSICAL MUST BE ELECTRONICALLY SUBMITTED VIA EMAIL OR HARD COPY AT EQUIPMENT HANDOUT BEFORE PRACTICE BEGINS, OR YOUR CHILD WILL NOT BE ABLE TO PARTICIPATE IN THE FIRST PRACTICE, AND WILL BE DISQUALIFIED FROM IRON MAN/SPIRIT AWARD**

**MEDICAL HISTORY MUST BE ELECTRONICALLY SUBMITTED VIA EMAIL OR HARD COPY AT EQUIPMENT HANDOUT BEFORE PRACTICE BEGINS, OR YOUR CHILD WILL NOT BE ABLE TO PARTICIPATE IN THE FIRST PRACTICE, AND WILL BE DISQUALIFIED FROM IRON MAN/SPIRIT AWARD**





# MEDICAL HISTORY: Completed by Parent or Guardian or 18-Year-Old

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Doctor: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_ Date of Exam: \_\_\_\_\_

- GENERAL QUESTIONS		Y	N	- MEDICAL QUESTIONS		Y	N
Has a doctor ever denied or restricted your participation in sports for any reason?				Do you cough, wheeze or have difficulty breathing during or after exercise?			
Do you have any ongoing medical conditions? If so, please identify below:				Have you ever used an inhaler or taken asthma medicine?			
<input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infections <input type="checkbox"/> Other: _____				Is there anyone in your family who has asthma?			
Have you ever spent the night in the hospital or have you ever had surgery?				Were you born without, or missing a kidney, eye, testicle (males), spleen or any other organ?			
- HEART HEALTH QUESTIONS ABOUT YOU		Y	N	Do you have groin pain or a painful bulge or hernia in the groin area?			
Have you ever passed out or nearly passed out DURING or AFTER exercise?				Have you had infectious mononucleosis (mono) within the last month?			
Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?				Do you have any rashes, pressure sores or other skin problems?			
Does your heart ever race or skip beats (irregular beats) during exercise?				Have you had a herpes or MRSA skin infection?			
Has a doctor ever told you that you have any heart problems? Check all that apply:				Do you have headaches or get frequent muscle cramps when exercising?			
<input type="checkbox"/> High blood pressure <input type="checkbox"/> Heart murmur <input type="checkbox"/> Heart infection <input type="checkbox"/> High cholesterol				Have you ever become ill while exercising in the heat?			
<input type="checkbox"/> Kawasaki disease <input type="checkbox"/> Other: _____				Do you or someone in your family have sickle cell trait or disease?			
Has a doctor ordered a test for your heart? (example, ECG/EKG, echocardiogram)				Have you had any problems with your eyes or vision or any eye injuries?			
Do you get lightheaded or feel more short of breath than expected during exercise?				Do you wear glasses or contact lenses?			
Do you have a history of seizure disorder or had an unexplained seizure?				Do you wear protective eyewear such as goggles or a face shield?			
Do you get more tired or short of breath more quickly than your friends during exercise?				Immunization History: Are you missing any recommended vaccines?			
- HEART HEALTH QUESTIONS ABOUT YOUR FAMILY		Y	N	Do you have any allergies?			
Has anyone in your family had unexplained fainting, unexplained seizures or near drowning?				Have you ever had a head injury or concussion?			
Does anyone in your family have a heart problem, pacemaker or implanted defibrillator?				Do you have any concerns that you would like to discuss with a doctor?			
Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident or sudden infant death syndrome)?				Have you ever received a blow to the head that caused confusion, prolonged headache or memory problems?			
Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome or catecholaminergic polymorphic ventricular tachycardia?				Have you ever had numbness, tingling, weakness or inability to move your arms or legs after being hit or falling?			
- BONE AND JOINT QUESTIONS		Y	N	Have you ever had an eating disorder?			
Have you ever had an injury to a bone, muscle, ligament or tendon that caused you to miss a practice or a game?				Do you worry about your weight?			
Have you ever had any broken or fractured bones, dislocated joints or stress fracture?				Are you trying to or has anyone recommended that you gain or lose weight?			
Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast or crutches?				Are you on a special diet or do you avoid certain types of foods?			
Do you regularly use a brace, orthotics or other assistive device?				- FEMALES ONLY (Optional)		Y	N
Do you have a bone, muscle or joint injury that bothers you?				Have you ever had a menstrual period?			
Do any of your joints become painful, swollen, feel warm or look red?				How old were you when you had your first menstrual period?			
Do you have any history of juvenile arthritis or connective tissue disease?				How many periods have you had in the last 12 months?			
Have you ever had an x-ray for neck instability or atlantoaxial instability (Down syndrome or dwarfism)?				<b>CURRENT-YEAR PHYSICAL = GIVEN ON OR AFTER APRIL 15 OF THE PREVIOUS SCHOOL YEAR</b>			

## PHYSICAL EXAMINATION & MEDICAL CLEARANCE: Completed by MD, DO, PA or NP - RETURN DIRECTLY TO PATIENT

EXAMINATION: Height: \_\_\_\_\_ Weight: \_\_\_\_\_ ☐ Male ☐ Female BP: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_ Vision: R 20/ \_\_\_\_\_ L 20/ \_\_\_\_\_ Corrected: ☐ Y ☐ N

MEDICAL	NORMAL	ABNORMAL	MUSCULOSKELETAL	NORMAL	ABNORMAL
Appearance: Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span > height, hyperflexity, myopia, MVP, aortic insufficiency)			Neck		
Eyes/Ears/Nose/Throat: Pupils Equal Hearing			Back		
Lymph nodes			Shoulder/Arm		
Heart: Murmurs (auscultation standing, supine, +/- Valsalva) Location of point of maximal impulse (PMI)			Elbow/Forearm		
Pulses: Simultaneous femoral and radial pulses			Wrist/Hand/Fingers		
Lungs			Hip/Thigh		
Abdomen			Knee		
Genitourinary (males only)			Leg/Ankle		
Skin: HSV: Lesions suggestive of MRSA, tinea corporis			Foot/Toes		
Neurologic			Functional Duck Walk		

### RECOMMENDATIONS:

I certify that I have examined the above student and recommend him/her as being able to compete in supervised athletic activities NOT crossed out below.  
 BASEBALL - BASKETBALL - BOWLING - COMPETITIVE CHEER - CROSS COUNTRY - FOOTBALL - GOLF - GYMNASTICS - ICE HOCKEY  
 LACROSSE - SKIING - SOCCER - SOFTBALL - SWIMMING/DIVING - TENNIS - TRACK & FIELD - VOLLEYBALL - WRESTLING

**EXAMINER** → Name of Examiner (print/type): \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature of Examiner: \_\_\_\_\_ (Check One): ☐ MD ☐ DO ☐ PA ☐ NP

----- (DETACH HERE IF NEEDED TO ACCOMPANY STUDENT-ATHLETE) -----

### EMERGENCY INFORMATION: COMPLETED BY PARENT or GUARDIAN or 18-YEAR-OLD

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Doctor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 IN EMERGENCY (1): \_\_\_\_\_ Home #: (\_\_\_\_) \_\_\_\_\_ Cell #: (\_\_\_\_) \_\_\_\_\_  
 IN EMERGENCY (2): \_\_\_\_\_ Home #: (\_\_\_\_) \_\_\_\_\_ Cell #: (\_\_\_\_) \_\_\_\_\_  
 Drug Reactions: \_\_\_\_\_ Current Medications: \_\_\_\_\_  
 Allergies: \_\_\_\_\_

FORM A AUG-05-17





## PRE-PARTICIPATION PHYSICAL - CONSENT - INSURANCE

Shaded headline areas are to be completed by student, parent/guardian or 18-year-old

There are FOUR (4) signatures on this page (4) to be completed by student, parent/guardian and/or 18-year-old

**A CURRENT-YEAR PHYSICAL IS ONE GIVEN ON OR AFTER APRIL 15 OF THE PREVIOUS SCHOOL YEAR**

Student Name: _____		
LAST	FIRST	MIDDLE INITIAL
Student Address: _____		
STREET	CITY	ZIP
Gender: <input type="checkbox"/> M <input type="checkbox"/> F Age: _____ Date of Birth: _____ Place of Birth (City/State): _____		
School: _____ Circle Grade: 6 7 8 9 10 11 12		
Father/Guardian Name: _____		
Phone (home): _____ (work): _____ (cell): _____		
Mother/Guardian Name: _____		
Phone (home): _____ (work): _____ (cell): _____		
Email Address: Parent/Guardian/18-Year-Old: _____		

### STUDENT PARTICIPATION & PARENT or GUARDIAN or 18-YEAR-OLD CONSENT

The information submitted herein is truthful to the best of my knowledge. By my/my child's signature below, I/we acknowledge that I/we have received concussion educational information that meets Michigan Department of Health and Human Services and MHSAA requirements.

Further, in consideration of my/my child's participation in MHSAA-sponsored athletics, I/we do hereby agree, understand, appreciate, and acknowledge: that participation in such athletics is purely voluntary; that such activities involve physical exertion and contact and that there is inherent risk of personal injury associated with participation in such activities, which risk I/we assume; and that I/we agree to, and hereby waive any and all claims, suits, losses, actions, or causes of action against the MHSAA, its members, officers, representatives, committee members, employees, agents, attorneys, insurers, volunteers, and affiliates based on any injury to me, my child, or any person, whether because of inherent risk, accident, negligence, or otherwise, during or arising in any way from my/my child's participation in an MHSAA-sponsored sport.

I/we understand that I am/we are expected to adhere firmly to all established athletic policies of my school district and the MHSAA. I/we hereby give my consent for the above student to engage in interscholastic athletics and for the disclosure to the MHSAA of information otherwise protected by FERPA and HIPAA for the purpose of determining eligibility for interscholastic athletics. My child has my permission to accompany the team as a member on its out-of-town trips.

① Signature of STUDENT: \_\_\_\_\_ Date: \_\_\_\_\_  
② Signature of PARENT or GUARDIAN or 18-YEAR-OLD: \_\_\_\_\_ Date: \_\_\_\_\_

### INSURANCE STATEMENT

Our son/daughter will comply with the specific insurance regulations of the school district.

The student-athlete has health insurance: ☐ YES ☐ NO

If YES, Family Insurance Co: \_\_\_\_\_ Insurance ID #: \_\_\_\_\_

Additionally, I hereby state that, to the best of my knowledge, my answers to the medical history questions (see reverse) are complete and correct.

③ Signature of PARENT or GUARDIAN or 18-YEAR-OLD: \_\_\_\_\_ Date: \_\_\_\_\_

----- (DETACH HERE IF NEEDED TO ACCOMPANY STUDENT-ATHLETE) -----

### MEDICAL TREATMENT CONSENT: COMPLETED BY PARENT or GUARDIAN or 18-YEAR-OLD

I, \_\_\_\_\_, an 18-year-old, or the parent or guardian of \_\_\_\_\_, recognize that as a result of athletic participation, medical treatment on an emergency basis may be necessary, and further recognize that school personnel may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the then-existing circumstances and to assume the expenses of such care.

④ Signature of PARENT or GUARDIAN or 18-YEAR-OLD: \_\_\_\_\_ Date: \_\_\_\_\_



## **ROCHESTER FOOTBALL & CHEER** **VOLUNTEER PARTICIPATION AGREEMENT FORM**

**The Rochester Football & Cheer is a volunteer youth organization that functions at its best with the assistance of volunteers**

I understand that my child's participation in the Rochester Football & Cheer organization is contingent upon my participation as an adult volunteer. I understand that if I do not fulfill the volunteer requirements for the current season (for home and away games) as set forth by the Board of Directors and described below, my volunteer deposit check will be cashed, and my son(s) and/or daughter(s) will lose their returning player status for the following season.

Every parent/guardian will be required to submit a separate volunteer check at the time of equipment handout and before volunteer sign-up day (TBD) for **\$300.00** as a deposit to ensure volunteer participation. Online volunteer sign-up to complete your required duties will only be accessible to those who have submitted this form and deposit check.

**Every parent/guardian is required to sign up for the minimum required volunteer commitments as set each year by the Board of Directors on or before the first scheduled football game.** Deposit checks will be cashed under the following circumstances:

1. If you are not signed up for your minimum volunteer commitments by the first scheduled football game, your deposit check will be cashed.
2. If you do not COMPLETE the minimum required volunteer commitments for the season as set each year by the Board of Directors, your deposit check will be cashed.
3. No Call/No Show: If you miss a scheduled volunteer commitment without 48 hrs notice to the Board, your deposit check will be immediately cashed. If you do give a 48-hour notice cancellation of a scheduled volunteer commitment, you will try to find a replacement and immediately sign up for an additional volunteer commitment for the season.

Gameday volunteers, special events, home and away volunteers are absolutely necessary to our program's success. Gameday volunteer positions include, but are not limited to: Chain gang, spotters, booth announcer, photographer, game clock operator, and 50/50 raffle. Online sign up for these activities will take place once the league sets the game schedule. At the end of the season, deposit checks will be shredded after your volunteer commitments have been confirmed.

I agree to the above terms by signing this agreement and am obligated to show up when I am scheduled to volunteer. If I do not fulfill my volunteer obligations as set forth above, I authorized the Rochester Football & Cheer to cash my volunteer deposit check.

Parent Signature: \_\_\_\_\_

Parent Name (Printed): \_\_\_\_\_

Participants Name (Printed): \_\_\_\_\_

Check One: Football: \_\_\_\_\_ Cheer: \_\_\_\_\_

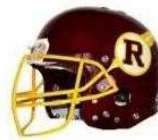
Check One: Jr. Freshmen \_\_\_\_\_ Freshmen: \_\_\_\_\_ JV: \_\_\_\_\_ Varsity: \_\_\_\_\_

For Rochester Football & Cheer Internal Use Only

Check # \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name on check if different from participant: \_\_\_\_\_

**The form should be read as part of the online registration process and will be agreed to upon completion of registration. \$300 Deposit check is due at Equipment Handout on June 5, 2021.**



## **ROCHESTER FOOTBALL & CHEER** **EQUIPMENT USAGE AGREEMENT FORM**

Every parent/guardian will be required to submit a check on equipment handout day for **\$300.00** as a deposit for your child's football or cheer equipment. This deposit will guard your Rochester Football & Cheer program against having to unnecessarily spend its resources to replace unreturned or damaged equipment. (NOTE: normal wear & tear does not equate to damaged equipment). Upon submitting the check, your child will receive their equipment (football-helmet, pads, practice/game pants, belts, jerseys, etc.) or (cheer-skirts, vests, etc.) Your deposit check will then be securely filed. At the end of the season, your deposit check will be shredded in exchange for your player's equipment unless otherwise requested. Please know that your check will be handled with extreme care and security and will never be deposited without prior knowledge. **Equipment will NOT be issued without submitting the mandatory deposit check, NO EXCEPTIONS!**

Please clean/wash all equipment before turning it in.

By signing this agreement, I agree to the above terms and am obligated to return all undamaged loaned equipment at the end of the current season. I understand that if I fail to do so, the Rochester Football & Cheer Conference will cash my equipment deposit check.

Parent Signature: \_\_\_\_\_

Parent Name (Printed): \_\_\_\_\_

Participants Name (Printed): \_\_\_\_\_

Check One: Football: \_\_\_\_\_ Cheer: \_\_\_\_\_

Check One: Jr. Freshman \_\_\_\_\_ Freshman: \_\_\_\_\_ JV: \_\_\_\_\_ Varsity: \_\_\_\_\_

For Rochester Football & Cheer Internal Use Only

Check # \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name on check if different from participant: \_\_\_\_\_

The form should be read as part of the online registration process and will be agreed to upon completion of registration. **\$300 Deposit check is due at Equipment Handout on June 5, 2021.**



## **2021 ROCHESTER FOOTBALL & CHEER ATTENDANCE & PARTICIPATION POLICY**

In Article II of the Bylaws, the Rochester Football & Cheer organization sets out its purpose:

“This corporation is organized to educate and instruct juvenile boys and girls without regard to race, color, or religion in certain sports and athletic endeavors so that they may increase their capabilities as individuals, improve their physical, mental, and moral well-being, and develop a sense of fair play and good sportsmanship.”

Both football and cheerleading are physically intensive, team-oriented sports that depend on a high level of physical conditioning and group coordination for success. As such, attendance at every practice and game is expected by the Board and the respective coaching staffs.

### **Attendance Policy**

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Once the Rochester Football & Cheer season begins, every participant is expected to attend every practice and game. There are instances where absences from practice may be excused; all of these instances should be discussed with the appropriate VP of Football or VP of Cheer beforehand (whenever possible).

Examples are:

- Death in the Family

- Child Sickness (with doctor's note is required on the 3<sup>rd</sup> day)

- Special Event with approval from the VP of Football Operations or the VP of Cheer Operations

- School Commitments

- Church Commitments

If any child incurs three (3) unexcused absences during the year, they are subject to dismissal from the team.

### **Participation Policy**

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Any child who misses two or more practices during the week will not participate in that week's game but is expected to attend. Attendance at every practice and game is expected and is a very important part of our football and cheer programs. All absences should be discussed with the appropriate VP of Football or VP of Cheer beforehand.

# **IRON MAN / SPIRIT AWARD POLICY**

Any child who meets the participation policy and the stringent attendance expectations will be rewarded with an Iron Man / Spirit Award at the year-end banquet. There are several circumstances where participants cannot attend every practice or game because of a more important family, religious, or school commitment (i.e., 5<sup>th</sup> Grade Camp). Although these instances count as excused absences for the Attendance policy purposes, they are not exceptions to the Iron Man and Spirit Award eligibility. The Iron Man and Spirit Awards are not meant to punish those who cannot attend every practice and every game but instead to recognize those participants who are able to meet the strict attendance requirements.

## **Iron Man Policy**

Recipients must attend every practice in its entirety and the entirety of every game, including playoff games and Super Bowl, to be eligible for the Iron Man Award. Please note that walk through practices for Freshman, JV, and Varsity count as a regularly scheduled practice and will take place either on Friday night or Saturday before the games as determined by the Head Coach. The only exception for a missed practice is an unscheduled voluntary practice.

## **Spirit Award**

Cheer participants are required to attend every scheduled practice in its entirety, the entirety of every game where they are scheduled to cheer and the entirety of the Super Cheer event to be eligible for the Spirit Award. Cheer participants are also required to attend every playoff game in its entirety with the exception of the weekend of Super Cheer. The only exception for a missed practice is an unscheduled voluntary practice.

## **Lifetime Achievement Award**

### ***Football Lifetime Achievement***

Any football player who gave **six (6) consecutive** years of hard work and dedication to the Rochester Football & Cheer organization will be given a Lifetime Achievement Award at the year-end Banquet. In order to receive the Lifetime Achievement Award, a player must have completed the required years in the program and exhausted, due to age or grade, his eligibility as set forth by the current year League Rules.

### ***Cheer Lifetime Achievement***

Any cheerleader who gave six (6) **consecutive** years of hard work and dedication to the Rochester Football & Cheer organization will be given a Lifetime Achievement Award at the year-end Banquet. In order to receive the Lifetime Achievement Award, a participant must have completed the required years in the program and exhausted, due to age or grade, his or her eligibility as set forth by the current year League rules. (Example: Must Cheer through the 8<sup>th</sup> grade if eligible).



# **ROCHESTER FOOTBALL & CHEER**

## **CODE OF CONDUCT**

All coaches, football, cheerleading, and team officials, whether with or without realizing the fact, are looked upon as potential Role Models by the participants. Coaches are the ambassadors of the Conference, and in many cases, will be the only contact that a player, cheerleader, or parent will have with the conference. Coaches create the opinions that participants and parents will perceive of the Michigan Youth Football & Cheer Conference (MYFCC) either positively or negatively and can significantly impact this organization's future success.

Therefore, all coaches, football, cheerleading, and team officials will abide by the Code of Conduct and Rules. If any rules or codes of conduct should be broken, the Rochester Football & Cheer Board of Directors shall have the authority to impose a penalty. The Board of Directors, depending on the violation and the severity of its impact, shall determine this penalty, which may result in suspension or expulsion from the Rochester Football & Cheer organization.

These categories are generally descriptive of the most obvious types of misconduct and are not to be construed as an exclusive list or as a limitation upon the authority of the Rochester Football & Cheer Board of Directors to deal appropriately with any other types of conduct, which interfere with the good order of the organization.

The following applies to any Rochester Football & Cheer Board member, coach, director, football player, cheerleader, parent/guardian, or fan.

1. Insubordinations, disrespect, or disregard of verbal instruction or direction of the coaches or the VP of Football or Cheer.
2. Open persistent defiance of the authority of a staff member.
3. Taunting players, coaches, officials, Board members, or other parents/spectators by means of baiting, ridiculing, bullying, harassment, stalking, verbal and/or non-verbal, including written and social media, threats of physical violence, or displaying physical violence. *Law enforcement authorities may be notified in cases of this misconduct.*
4. Larceny/petty theft/vandalism  
Any theft or vandalism of money, personal or public property of \$5 or more value; and/or theft involving unlawful entry. *Law enforcement authorities may be notified in cases of this misconduct.*
5. Offensive speech/displays  
Speech, communication (written or verbal), or displays that tend to disrupt the orderly conduct of practices or games, including:
  - a. The use of vulgar acts, obscenities, or gestures.
  - b. Racial or ethnic slurs and/or intimidation.
6. Fighting
  - a. The act of physical bullying or quarreling, including bodily contact.
  - b. Incitement – the act of inciting or prompting others to action.
7. Possession, consumption, or under the influence of alcoholic beverages, alleged drugs, or performance-enhancing drugs are prohibited at all times. *Law enforcement authorities may be notified in cases of this misconduct.*
8. The use of smoking materials or substances (cigarettes, cigars, chewing tobacco, etc.) on school grounds is strictly prohibited. *Law enforcement authorities may be notified in cases of this misconduct*

9. Possession or use of weapons

The term weapons shall mean any object or instrument of which the principal use is to inflict injury or physical harm upon the person of another, or the use of which may result in pain or suffering. *Law enforcement authorities may be notified in cases of this misconduct.*

10. Accept decisions of the game officials on the field as being fair and called to the best ability of said officials.

11. Do not criticize an opposing team, players, coaches, or fans by word of mouth, gesture, or in writing.

12. Any fan that becomes a nuisance and out of control will be asked to leave.

13. Ensure all equipment be cared for properly and is not allowed to be used in an abusive or destructive manner.

14. Do not deliberately incite unsportsmanlike conduct.

**IN ADDITION, COACHES SHALL:**

1. Follow the rules as prescribed for coaches in the Michigan High School Athletic Association rules and those of the Michigan Youth Football & Cheer Conference. These rules shall be the governing rules of the Rochester Football & Cheer. The rules listed below shall apply if they are not already within the rules and guidelines of the above-mentioned MYFCC.
2. Criticize only in a constructive manner, with the intent to benefit and never to humiliate a participant. Coaches should look for ways to compliment and always offer positive reinforcement where possible.
3. Refrain from making negative comments regarding fellow coaches, programs, or players of the MYFCC teams in front of football/cheerleading participants, other coaches, and parents while on the practice field, games or Conference sponsored events. If it is felt that fellow coaches are making mistakes, offer assistance by means of communicating your observations to the Vice President of Football or Cheer Operations. The Vice President of Football or Cheer Operations will determine if your observation warrants further action.
4. Strive to make every football/cheerleading activity serve as a training ground for life and a basis for good mental and physical health.
5. Emphasize that winning a game is the result of good TEAMWORK.
6. Treat all participants the same. There shall not be any favoritism shown or special privileges given to one participant that cannot be given to another.
7. When scores are such that leads are commanding, refrain from "piling it on," but use this as an opportunity to let all players receive more playing time.
8. Uphold all rules and regulations adopted by the Michigan Youth Football & Cheer Conference.
9. Coaches alone do not make the team or conference policy. However, on the playing and practice fields, the coaching staff is in complete charge and shall not be interfered with except in cases of rule violations and any other conduct deemed by the Board of Directors to be contrary to the welfare of youth participants.

**We expect all Rochester Football & Cheer participants to enjoy the game and support and respect all players, cheerleaders, coaches, officials, Board members, and parents (regardless of team affiliation).**

For situations not covered specifically above, the Rochester Football & Cheer will follow the:

Code of Responsible Behavior and Student Conduct-Plus Student Athletic Code for the applicable year.

*Published by:*                      *Rochester Community Schools*  
   *501 W. University Dr.*  
   *Rochester, MI 48307 (248) 651-6210*

## **CODE OF CONDUCT & AGREEMENT SIGNATURE PAGE**

Please sign and return this form to acknowledge that you have read and agree to the Rochester Football & Cheer Code of Conduct, the Rochester Football & Cheer 2021 Attendance and Participation Policy, the Rochester Football & Cheer Volunteer Participation Agreement, and the Rochester Football & Cheer Equipment Usage Agreement. These policies/agreements apply to any Rochester Football & Cheer Board member, Coach, Director, Football Player, Cheerleader, Team Mom or Manager, and Parent/Guardian.

I understand that failure to comply with the above code of conduct will result in 1 warning unless the Rochester Football & Cheer Board of Directors decides that a violation of this code merits immediate suspension or expulsion from the program.

Print Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_

Father's Signature: \_\_\_\_\_

Team: \_\_\_\_\_

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

**The form should be read as part of the online registration process at  
[www.rochesterfootballandcheer.com](http://www.rochesterfootballandcheer.com) and will be agreed to upon completion of registration**

# **PARENT & ATHLETE CONCUSSION INFORMATION SHEET**

## **WHAT IS A CONCUSSION?**

A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

## **WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?**

Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury.

If an athlete reports one or more symptoms of concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of play the day of the injury. The athlete should only return to play with permission from a health care professional experienced in evaluating for concussion.

## **DID YOU KNOW?**

- Most concussions occur without the loss of consciousness.
- Athletes who have, at any point in their lives, had a concussion have an increased risk for another concussion.
- Young children and teens are more likely to get a concussion and take longer to recover than adults.

## **SYMPTOMS REPORTED BY ATHLETE:**

- Headache or “pressure” in the head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems

- Confusion
- Just “not feeling right” or is “feeling down”

## **SYMPTOMS REPORTED BY COACHING STAFF**

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can’t recall events prior to hit or fall
- Can’t recall events after hit or fall

## **CONCUSSION DANGER SIGNS**

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil is larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)



## **CONCUSSION SIGNATURE PAGE**

Information garnered from the Michigan Department of Community Health and the CDC's Heads Up Program. To learn more please visit [www.cdc.gov/concussion](http://www.cdc.gov/concussion)

### **WHAT SHOULD YOU DO IF YOU THINK YOU ATHLETE HAS A CONCUSSION?**

1. If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says s/he is symptom-free and it's OK to return to play.
2. Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, and playing video games, may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.
3. Remember: Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

### **WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?**

If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, s/he is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brain. They can even be fatal.

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**STUDENT-ATHLETE NAME PRINTED**

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**STUDENT-ATHLETE NAME SIGNED**

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**DATE**

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**PARENT NAME PRINTED**

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**PARENT NAME SIGNED**

---

**DATE**

**IF CONCUSSION FORM IS AGREED TO AND SUBMITTED ELECTRONICALLY DURING REGISTRATION**

# **ROCHESTER FOOTBALL & CHEER WAIVER OF LIABILITY, RELEASE**

For and in consideration of the undersigned participant's registration with **Rochester Football, Inc.** (Name of Organization) ("Organization") and being allowed to participate in events and member activities, participant and the parent(s) or legal guardian(s) of participant waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage, includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19 or wrongful death occurring to participant or participant's parent(s) or legal guardian(s) arising out of participation in events, or sports, and/or activities incidental thereto, whenever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant and/or participant's parent(s) or legal guardian(s) may have are hereby waived, released and relinquished, and participant and participant's parent(s)/guardian(s) do so on behalf of their heirs, executors, administrators and assigns.

Participant and participant's parent(s)/guardian(s) acknowledge, understand and assume all risks relating to events or sports participation and activities incidental thereto, and understand that activities incidental thereto involve risks to participant's and participant's parent(s)/guardian(s) person including bodily injury, illness from infectious diseases partial or total disability, paralysis and death, and damages which may arise therefrom and that we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant, participant's parent(s)/guardian(s) or the negligence of others, including the organization, its affiliates, members, event hosts, other participants, other parents and legal guardians, coaches, officials, sponsors, advertisers, owners and operators of the premises used to conduct any event and each of them, their officers, directors, agents, and employees (collectively, "releasees"), and include risks arising from the conditions and use of facilities and related premises. I/We further acknowledge that there may be risks and dangers not known to us or not reasonably foreseeable at this time.

Participant and participant's parent(s)/guardian(s) acknowledge, understand and assume the risks, if any, arising from the conditions and use of facilities and related premises, whether as a participant or a spectator, including without limitation, the risks involved with participating in the Organization's activities. Participant and participant's parent(s)/guardian(s) further acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said facilities, for negligent selection of certain releasees, or negligent supervision or instruction by releasees.

Participant and participant's parent(s)/guardian(s) acknowledge, understand The Organization reserves the right to photograph facilities, activities, and program participants for potential future use. All photos remain the property of the Organization and may be used for publicity and promotional services.

Consent to Medical Treatment of Minor: I hereby give my consent to have the above applicant treated by a physician or surgeon in case of sudden illness or injury while participating in the above event. It is understood that the Organization provides no medical insurance for such treatment under its liability insurance coverage. Medical benefits for such treatments/injuries may be provided with proof of medical coverage purchased through the Organization. The location of the activity or the nature of the illness or injury may require the use of emergency medical personnel.

Participant and participant's parent(s)/guardian(s) agree if any claim for personal injury, illness from infectious diseases or wrongful death is commenced against releasees, he/she shall defend, indemnify and save harmless from any and all claims or causes of action by whomever or wherever made or presented for his/her personal injuries, property damage, possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19 or wrongful death.

Participant and participant's parent(s)/guardian(s) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers and risks and understand these waivers and releases are necessary to allow the activities of the Organization to exist in its present form.

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**Participant Signature**

**Age**

**Date Signed**

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**Participant Name (Print)**

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**Parent or Guardian Signature**

**Date Signed**