

WINCHESTER-FREDERICK COUNTY YOUTH FOOTBALL LEAGUE

REGISTRATION FORM FOR 2024 FALL SEASON. See WFYFL.org for updates

Each person intending to play football or cheer this season must fill out the application/registration form below, which must be signed by the parent or legal guardian. Please bring the following application, and a copy of their birth certificate (if new to the program) to:

On-Site:

To be announced

Or Register On-Line at www.WFYFL.org

PARENT MEETING WILL BE JULY 29, 2024 – 5:30PM - ROTARY SHELTER

Cheer:

1. PeeWee Cheer can be ages 5, 6 and 7, practices will be 2 days a week and games are on Saturdays.
2. Sideline Cheer can be between the ages of 8-13, not turning 14 before August 1st, 2024.
3. Cheer practice will begin July 30th in the Jim Barnett Park in the field above Christianson Familyland.

Football: We have four (4) divisions of football teams. We have one division consisting of 6 and 7 year olds. They will remain together for practices and scrimmage games. The next division is for 8 and 9 year olds. Our 3rd division is for 10 and 11 year olds. Our last division is for 12 and 13 year olds this is considered our Competitive division.

1. Football practice will begin July 30th – coaches will inform you of the location.
2. There is no weight limit to play in the league.
3. Ball carrying weights will be: 75 lbs for 6-7 year olds, 95lbs for 8-9 year olds and 130 lbs for 10-11 year olds, no ball carrying weight for 12-13 year olds.
4. If a player misses two practices during the week, excused or otherwise, they will not be allowed to play in that week's game. Once the season starts there are only 3 practice days before the game, if a child misses 2 of them they will not know the game plan. It is also unfair to start the child over another that has made every practice that week and knows the game plan. There will be no exceptions to this rule.
5. All returning players not registered by July 26th, 2024 will be placed in the draft – NO EXCEPTIONS.
6. Tryouts/evaluations for new players or players placed in the draft (A-B-C teams) will be July 27, 2024 in the Winchester Park.
7. Weigh-ins will be on or about July 31, Aug 1-2, 2024 during equipment hand out. Any player not in attendance will NOT participate in contact until weighed in by a non-league official. There will be only 1 weigh-in.
8. Cut-off date for Registration and weigh-ins is August 3, 2024.

6 and 7-year-old Football Division (D Team):

9. Must be 6 by **August 1, 2024**
10. Players in the 6-7 year-old division will all practice together and will be divided into two teams.
11. Schedule of scrimmage games for 6-7-year olds will be mostly on Saturday mornings.
12. Ball carrying weight – 75 lbs.

8 and 9-year old Football Division (C Team):

13. Must be 8 by **August 1, 2024**
14. Maximum weight to carry the ball or play in a skill position is 95 lbs. Over 95 lbs. plays on the line of scrimmage.
15. Maximum weight for playing quarterback, running back, receiver, linebackers or defensive secondary in the 8 and 9-year-old division is 95 lbs.

10 and 11-year old Football Division (B Team):

- 16. Must be 10 years old by **August 1, 2024.**
- 17. Maximum weight to carry the ball or play in a skill position is 130 lbs. Over 130 lbs. plays on the line of scrimmage.
- 18. Maximum weight for playing quarterback, running back, receiver, linebackers or defensive secondary in the 10 and 11-year-old division is 130 lbs.

Competitive Football Division (A Team):

- 19. Must be in 7th or 8th Grade “on time” to graduate
- 20. 6th Graders not eligible for 10 – 11 year old division based on age are eligible.
- 21. There will be NO Ball carrying weight limit.

Age example: If 9 now and 10th birthday falls on July 20 ... child will play with the 10's
 If 9 now and 10th birthday falls on August 2 ... child will play with 9's

See us on Facebook at:

Football: <https://www.facebook.com/winchesterlittleleaguefootball/?fref=ts>
Cheer: <https://www.facebook.com/WFYFL-Cheer-282150891797754/?fref=ts>

Email: wfyfl@yahoo.com
Website: www.wfyfl.org

We have read, understand completely, and will adhere to these rules above:

Signatures Parents/Guardians

_____ Date _____

_____ Date _____

WINCHESTER-FREDERICK COUNTY YOUTH FOOTBALL LEAGUE

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NAME _____ DATE OF BIRTH _____

WEIGHT _____ PHONE NUMBER (H) _____ (Cell) _____

EMAIL _____

PARENTS (GUARDIAN'S) NAME _____

ADDRESS _____

SCHOOL ATTENDING _____

GRADE IN SCHOOL _____ Copy of Birth Certificate _____

FEES: CHEER \$170 (*\$135 if before July 1, 2024*) FOOTBALL \$170 (*\$135 if before July 1, 2024*)

☐ Cash _____ ☐ Check # _____ ☐ Cash _____ ☐ Check # _____

Please make all checks payable to:

Winchester-Frederick County Youth Football League (WFYFL)
PO Box 2900
Winchester VA 22604

Interested in ☐
Coaching

PLEASE READ AND COMPLETE THE FOLLOWING:

I (we) herewith in giving my (our) consent for _____ to enroll in the Winchester-Frederick County Youth Football Program sponsored by the Winchester-Frederick Youth Football League, Inc., assume all risks and hazards incidental to his participation in the program, and do waive and release, and do indemnify and hold harmless, the Winchester-Frederick County Youth Football League, Inc. against, employees, volunteers, sponsors, coaches, and participants, from all claims for injuries to him arising out of his participation in this program.

I (we) understand that a One-hundred seventy dollar (\$170.00) registration fee must accompany this registration form. I (we) agree that it is my (our) responsibility to return equipment promptly at the end of the season.

I (we) further agree that if uniforms are not returned, I (we) shall be liable to WFYFL for \$300.00 per uniform issued to my (our) child (children). Any Returned Checks are subject to a \$30 Return Check Fee.

Signatures Parents/Guardians _____ Date _____

_____ Date _____

INSURANCE

The Winchester-Frederick County Youth Football League, will provide secondary insurance coverage on every participant in the program. This insurance will go into affect, when a primary care insurance does not cover the full claim. If the individual does not have any insurance, this secondary insurance will become primary.

Signatures Parents/Guardians _____ Date _____

_____ Date _____