

ATTACH RECENT
PHOTO HERE

A recent photo of the
player must be
attached to this form.

2011 BVFA Player Certification Form Cleburne Association

Any player that does not live in or attend a school in the Cleburne ISD, & did not play for this association in 2010, must have a Special Consideration approval from the BVFA Board of Directors.

Name of Player _____ DOB _____ Age ____ Grade ____

(for 2011-2012 school year). Name of School _____ .

The above school is in the _____ ISD.

Player's home address is _____ City _____ Zip _____

The above address is located in the _____ ISD.

Please check the following residence statement that applies to this player.

___ **Returning Player.** Played last season for this Cleburne association.

___ **Returning Player.** Played in 2010 for another BVFA member (_____)

___ **New Player.** Did not play football for any BVFA member in 2010.

I understand that the above player must attend the certification and weigh-in that will be held on August 13, 2011. Failure to do so may result in this player being removed from the team roster and being disqualified from all related activities. I hereby certify that the above information is correct.

Parent or Guardian Signature: _____

Printed Name of Parent or Guardian: _____

(Date) _____ (Telephone Number) _____

To be completed by an Cleburne association Board Member.

The original of this form and attached photo must be presented at the Brazos Valley Football Association Player Certification and Weigh In. After the player is certified it must be kept in the Coaches Book. A player will not be certified or weighed unless this form is completed and signed, a recent picture is attached, and the player's birth certificate is in the Coaches Book. Please verify the following:

___ Player lives in the Cleburne ISD. (LI)

___ Player does not live in, but attends a school in the Cleburne ISD. (ATT)

___ Player does not live in the Cleburne ISD or attend an Cleburne ISD school, but played football for Cleburne in 2010 (Team: ___ Bantam ___ Minor ___ Major / Team Number ___) (RP)

___ Special Consideration Approval is required because the player does not live in or attend a school in the Cleburne ISD, and did not play for Cleburne in 2010.

Signature of Board Member: _____ (Date) _____