



BILLERICA POP WARNER

2024 Registration Dates:

Every Saturday in March (2nd, 9th, 16th, 23rd and 30th) 9AM – 12PM

At Billerica High School (nurses hallway)

2024 Registration Packet Contains: (All forms are downloadable/printable)

2024 Participant Contract & Parental Consent Form: <ul style="list-style-type: none"> Completely fill in all blank spaces 	Page 1
2024 Parent/Guardian Permission and Waiver: <ul style="list-style-type: none"> Completely fill in all blank spaces 	Page 2 & 3
2024 Physical Fitness & Medical History Form: <ul style="list-style-type: none"> Parent must fill in in all pertinent spaces Completely fill in all blank spaces 	Page 4 & 5

2023 Registration Fee Schedule

	Until 3/31/2024	4/1/2024 – 7/31/2024	8/1/2024 – 8/10/2024
1 st Child	\$100 + \$30 Cash Calendars	\$150 + \$30 Cash Calendars	\$200 + \$30 Cash Calendars
2 nd Child	\$75 + \$30 Cash Calendars	\$125 + \$30 Cash Calendars	\$175 + \$30 Cash Calendars
3 rd Child	\$65 + \$30 Cash Calendars	\$115 + \$30 Cash Calendars	\$165 + \$30 Cash Calendars

****Registration fees are NON-REFUNDABLE, and a \$35 service fee will be charged for all returned checks****

Checks are made payable to "Billerica Pop Warner". \$5 processing fee for all credit transactions

- ❖ **Cash Calendars:** Three (3) cash calendars at \$10.00 each must be purchased at time of registration for EACH child participating in the program. Cash Calendars will be handed out in August
 - A prize will be awarded to the participant who sells the most calendars. Additional Calendars will be available for purchase through the month of August. *Please reference the fundraising page on our website for more information.*
- ❖ **Original Birth Certificates:** An original Birth Certificate **with a raised seal** is **REQUIRED AT REGISTRATION**, NO Hospital Birth Certificates will be accepted. If you are a returning player/cheerleader, your birth certificate should be on file.
- ❖ **Report Cards:** We must have a copy of your child's FINAL FULL Report Card from the 2023-2024 School year. *Please note: These can be mailed, emailed to billericapopwarner@gmail.com no later than July 14th.*
- ❖ **Bingo:** Billerica Pop Warner hosts Bingo as a fundraiser every Wednesday evening at the Billerica Elks. We host this fundraiser to help keep our registration fees low. Every parent is required to **WORK TWO BINGO** per registered child (not to exceed 6 Bingos). If the Bingo requirement is not met the registration fees will cost an **additional \$475 per child**. This will be over and above the registration cost. When you enroll your son/daughter in our program, you will be assigned a date. Please plan to arrive at 5:00 pm and stay until close.
- ❖ **Volunteering:** When you register for BPW you are also registering to help run this league. Volunteering is a requirement for every family. Examples snack shack, chain gang, cheer competitions, etc.

Important Information:

No child will be placed on a TEAM, RECEIVE EQUIPMENT, or be ALLOWED TO PARTICIPATE without completing all REQUIRED paperwork.





2024-2025 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM

Special Note: This form must be completed, signed by the youth participant's parent or legal guardian, and dated after January 1, 2024. The form applies only to the 2024 Fall – 2025 Spring season. It needs to be submitted to your LOCAL Pop Warner organization prior to participation in any programs. **By signing this form, the parent or legal guardian agrees to the terms and conditions outlined below.**

Section I: POP WARNER AFFILIATION

League: _____ Association: _____

Section II: YOUTH PARTICIPANT INFORMATION (must match birth certificate)

Last: _____ First: _____ Middle: _____

Date of Birth: _____ Age: _____ Male Female Sport: Football Cheer/Dance

Section III: PARENT/GUARDIAN INFORMATION

Last: _____ First: _____

Address: _____ City: _____ State: _____ Zip: _____

Mobile Phone No: _____ Alternate Phone No: _____

Email: _____ Relationship to Child: _____

Section IV: EMERGENCY CONTACT INFORMATION (if parent/guardian cannot be reached)

Name: _____ Relationship to Child: _____ Phone No: _____

Section V: PARENT/GUARDIAN PERMISSION AND WAIVER

1. **PERMISSION:** I am the parent or legal guardian of the above-named participant. I acknowledge that my child is in good health. I give permission for my child to participate in any and all Pop Warner national, regional, league/conference, association and team/squad activities, including transportation to and from the activities. I give permission for, and assume any and all risk of my child's use of various playing surfaces including natural and artificial grass, cheer mats, hard dirt, and under varying conditions, including, dry, wet and muddy, and I hereby understand that any surface may be regular or irregular.

2. **RISK INFORMATION:** I acknowledge the inherent risk and danger of participation in any sport and I understand that participation in football, cheerleading and/or dance may result in **BODILY INJURY, including by not limited to PARALYSIS, BRAIN INJURY, PERMANENT DISABILITY AND/OR DEATH.** I acknowledge that protective equipment does not prevent all participant injuries and Pop Warner makes no representations or warranties regarding the equipment or its fitness for use. I release, indemnify, hold harmless and waive any claim against the coaches, local, league and regional Pop Warner organization(s), Pop Warner Little Scholars, Inc., and any and all organizers, sponsors, supervisors, participants, and persons transporting my child to and from activities, for any injury to my child whether the result of negligence or for any other cause.



2024-2025 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM

3. **EMERGENCY MEDICAL AUTHORIZATION:** I give permission for emergency medical/dental treatment or first aid to be administered to my child for any illness/injury/accident resulting from participation in Pop Warner activities.
4. **EQUIPMENT RESPONSIBILITY:** I acknowledge my responsibility for any and all equipment/uniforms loaned to my child and I agree to promptly return, upon request, the uniform and other equipment in good condition except for normal wear and tear. If I fail to comply, I will be responsible for the cost of such equipment/uniform.
5. **INSURANCE DISCLOSURE:** I am aware that my local Pop Warner organization carries group accident medical insurance which is secondary or excess to my insurance which is considered primary insurance. Further, I agree to notify in writing my head coach and local Pop Warner organization of any medical claim from participation in Pop Warner as soon as reasonably possible. I understand that the registration fee is not premium for insurance and that deductibles may apply.
6. **SCHOLASTIC FITNESS:** I confirm that my child is scholastically fit, having met the requirement of 2.0/70%, or that I have completed the scholastic eligibility form or the Home School Eligibility Form and will adhere to all rules and regulations therein. Further, I authorize my child's school to release grades, report cards, and all other scholastic information to the local Pop Warner organization in order to comply with scholastic fitness requirements.
7. **FINANCIAL RESPONSIBILITY:** I acknowledge that my rights, if any, to a refund depends on the local Pop Warner Organization policies, and I have also been advised of my fundraising obligations for the entire season and agree to fully comply with those obligations.
8. **COMMUNICATIONS, PROMOTIONS, AND CONSENT:** As a condition to my child's participation, I consent to receive communications by email and mail from Pop Warner Little Scholars, Inc. and its sponsors. I understand that Pop Warner Little Scholars does not sell its contact list. Communications may contain program information or special offers. I may "opt out" by instruction in the communication or by my written request to the Pop Warner National Office. Further, I grant Pop Warner the right and permission to make, reproduce, broadcast or otherwise use in perpetuity my child's name and likeness including photograph, films, videos, recordings, or other depictions or images in any form or media throughout the universe, for promotional material, advertising, editorial, trade or other purpose. To the extent that any benefit may accrue therefrom, I forever waive any interest in or claim to such benefit and acknowledge that Pop Warner is under no obligation to exercise any rights granted herein.
9. **ADHERENCE TO POP WARNER RULES AND PROCEDURES:** I understand that it is my responsibility to comply with all rules and regulations of Pop Warner Little Scholars Inc and its affiliated organizations and understand that non-compliance may be cause for discipline and/or dismissal of my child, myself, and/or other persons affiliated with me or my child. I further understand that my child must meet Pop Warner age and/or weight requirements on their official certification date as established by Pop Warner without exception and that the decision of the Weigh Master is final. I agree to furnish an authentic certified copy of my child's birth certificate to local Pop Warner officials and understand that valid proof of age, a current calendar year's signed medical form, scholastic fitness form and this form must be presented by date of certification in order to participate in Pop Warner activities. I hereby hold Pop Warner harmless of any financial loss as the result of any disciplinary action.
10. **DISPUTE RESOLUTION POLICY; SEVERABILITY:** I understand and acknowledge that all disputes with Pop Warner and all affiliated parties will be subject to binding arbitration in Langhorne, PA in accordance with Pennsylvania law. I hereby agree that this binding arbitration shall be in lieu of any litigation. I also understand and agree that if I contest any decision or ruling of Pop Warner and seek other recourse, that I will reimburse Pop Warner for all legal fees and expenses it reasonably incurs. If any portion of this form shall be deemed unenforceable, the remainder shall remain in full force and effect.



2024-2025 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM

Section VI: GENERAL CODE OF CONDUCT

Pop Warner Little Scholars, Inc. is committed to cultivating a safe and welcoming environment for its regional and national events and programs that encourages and promotes good sportsmanship by student-athletes, parents, coaches, administrators and other spectators. We ask that event participants and attendees cooperate in being respectful at all practice and competition venues, partner hotels and/or ancillary venues throughout the course of the event. All those involved with the event are expected to refrain from the following behaviors:

1. Acting in a way that is unruly, disruptive or illegal in nature.
2. Intoxication or other signs of impairment that may potentially result in bad behavior.
3. Excessive use of profanities and other vulgar language that that interfere with other attendees' ability to enjoy the event.
4. Using bigoted, demeaning or abusive or other disruptive and intimidating language and/or gestures.
5. Verbal or physical harassment of officials, participants and coaches before, during and following the competition.
6. Disrupting the progress of competition (including physically entering or throwing objects onto the playing field or competition mat).
7. Interfering with or failing to abide by security or emergency procedures or response
8. Displaying signs that contain offensive language, or any graphic art that may be deemed disrespectful.
9. Defacing, destruction or theft of property associated with the event, including property of the opposing team or other participants, including officials, as well as official venues.
10. Violence or threats of violence against other individuals at any official venue.
11. Publicly criticizing or making derogatory statements of an official, opposing teams, event personnel or its policies, or other individuals associated with the event. This includes comments with respect to their conduct, character, competence, integrity or appearance. Note: social media is deemed a public forum.
12. Failing to follow instructions of event personnel.
13. Any behavior which otherwise violates conduct codes set by partner venues, hotels or ancillary venues including but not limited to theme parks, as enforced by those properties.

Failure to abide by these expectations are grounds for removal from competition. Pop Warner reserves the right to remove individuals or the entire team. Depending on the infraction, a one-year ban from Pop Warner events and programs will be considered. A repeat offense of the same infraction may result in a permanent ban. All removals will be without refund.

Section VII: PARENT/GUARDIAN AUTHORIZATION

In consideration of participation in Pop Warner activities and by my signature below, I confirm that I have read, fully understand and voluntarily agree to be bound by all of the above and that all information provided by me is true and accurate.

Signature of Parent/Guardian: _____ **Date:** _____



2024-2025 YOUTH PARTICIPANT MEDICAL HISTORY FORM

Special Note: This form must be completed thoroughly and honestly, and signed by the youth participant's parent or legal guardian. It is to be completed and dated after January 1, 2024. This form applies to the 2024 Fall – 2025 Spring season and needs to be submitted to your LOCAL Pop Warner organization. This form and its contents will be available to authorized Pop Warner personnel and kept confidential. **By signing this form, the parent or legal guardian agrees to the terms and conditions outlined below.**

Section I: POP WARNER AFFILIATION

League: _____ Association: _____

Section II: YOUTH PARTICIPANT INFORMATION (must match birth certificate)

Last: _____ First: _____ Middle: _____

Date of Birth: _____ Age: _____ Male Female Sport: Football Cheer/Dance

Section III: PRIMARY AND SECONDARY CONTACT

Primary Contact: Parent or Guardian

Last: _____ First: _____

Address: _____ City: _____ State: _____ Zip: _____

Mobile Phone No: _____ Alternate Phone No: _____

Email: _____ Relationship to Child: _____

Secondary Contact:

Last: _____ First: _____

Mobile Phone No: _____ Alternate Phone No: _____

Email: _____ Relationship to Child: _____

Section IV: INSURANCE INFORMATION

Primary Insurance Company: _____ Primary Group/Policy #: _____ / _____

Does primary insured have Medicaid? Yes No Does primary insured have Medicare? Yes No

Family Doctor Name: _____ Doctor Phone No: _____

Section V: MEDICAL HISTORY OF THE YOUTH PARTICIPANT

Please identify and elaborate on any medical conditions which we should be aware (if none, write none):



2024-2025 YOUTH PARTICIPANT MEDICAL HISTORY FORM

Please list any medications currently being taken (if none, write none):

In the past 24 months, has the participant been tested, diagnosed and/or treated for a concussion: Yes No

If yes, provide the specific date and detail on the diagnoses/treatment and the outcome:

List any known allergies (if none, write none):

Date of last Tetanus Toxoid Booster: _____

The purpose of the above information is to ensure that medical personnel have details of any issues which may interfere with or alter medical treatment.

Section VI: PARENT/GUARDIAN CONSENT AND MEDICAL RELEASE

Recognizing the possibility of serious injury, illness or death, and in consideration for Pop Warner Little Scholars, Inc. and its members accepting my child as a participant in its official programs, I consent to my child participating in Pop Warner tackle football, flag football, cheer and / or dance. Further, I hereby release, discharge, and otherwise indemnify Pop Warner, its member organizations and sponsors, their employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the Programs, against any claim by or on behalf of my child as a result of participating in the Pop Warner programs.

My child has received a physical examination by a licensed health care provider within the past two years and has been found physically capable of participating in the sport of football and/or cheerleading & dance. I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child's participation in the programs. I give my consent to have an athletic trainer and/or licensed health care provider, including a medical doctor or dentist, provide my child with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.

Signature of Parent/Guardian: _____ **Date:** _____



Billerica Pop Warner

Billerica Pop Warner P.O. Box 106, Billerica, MA 01821

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BillericaPopWarner@gmail.com www.Billericapopwarner.org

Billerica Pop Warner Anti-Bullying Policy

Billerica Pop Warner is committed to providing a caring, friendly, and safe environment for all players and cheerleaders so that they can participate in our program in a relaxed and secure atmosphere. Billerica Pop Warner takes bullying seriously. Bullying of any kind will **NOT** be tolerated by our organization under any circumstance. It is expected that anyone who knows that bullying is occurring is expected to report the incident to a head coach, assistant coach, team parent or a board member. If bullying does occur, we as an organization want parents and participants to know that it will be dealt with both efficiently and effectively. We want parents and participants to be assured that they will be supported when any incident of bullying is reported.

Bullying is defined as an unwanted, aggressive behavior that involves a conscious desire to hurt, threaten, frighten, or make someone feel uncomfortable repeatedly, over a period of time.

There are four main types of bullying are as follows:

1. **Physical**- examples of physical bullying are, but not limited to; pushing, kicking, hitting, punching or any use of violence against a physical being.
2. **Verbal**- examples of verbal abuse are, but not limited to; name calling, racist remarks, teasing, taunting or verbally threatening to cause harm.
3. **Cyber**- examples of cyber bullying are, but not limited to; Posting embarrassing pictures or videos on social media platforms or through email or phone, posting degrading comments about an individual either on a social media platform or through email or phone, sending threatening or demeaning messages through online platforms or through email or phone.
4. **Indirect** examples of indirect bullying are, but not limited to; spreading rumors about an individual, excluding someone from social groups done purposefully, encouraging others to exclude an individual(s) from a social group done purposefully.

The following steps will be taken when an incident of bullying is reported:

1. Parents/guardians of both the aggressor(s) and child(ren) alleging being bullied will be informed. All coaches involved with both parties will be made aware of concerns and possible outcomes.
2. All bullying behavior or threats of bullying will be investigated and fairly assessed by respective members of Billerica Pop Warner. All parties involved will be kept informed and required to cooperate fully with BPW to remedy the situation. In the event the incidents of bullying do not stop after careful intervention, the aggressor(s) involved in the situation may be subject to further actions (*see possible outcomes*).



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Billerica Pop Warner Anti-Bullying Policy (con't.)

Possible Outcomes:

Disciplinary actions for those individuals found to have violated the Anti-Bullying Contract are as follows:

1. First offense will result in a verbal and/or written warning. All parties involved including athletes, parents, coaches, board members will be made aware of such said warning.
2. Second offense will result in practice and game suspension for one week.
3. Third offense will result in a ban from participating in any Billerica Pop Warner sponsored event including but not limited to practices, games, competitions, playoffs, banquets, etc. for the remainder of respective season.

We have read and acknowledge the Anti-Bullying policy put forth by Billerica Pop Warner and understand that violation in part or whole of the policy may result in the suspension of my child's participation in the organization for the respective season at hand.

Participant's Name

Parent/Guardian Printed Name:

Parent/Guardian Signature:

Date Signed:



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Billerica Pop Warner Practice Attendance Policy

Practices for both cheer and football are **MANDATORY**. There are two types of excusals when a practice is missed.

- **An excused absence:** an absence that is caused due to sickness, injury, death in the family, religious commitment and/or school commitments.
 1. There is no penalty for **one** excused absence in a week. The player/cheerleader will be eligible for at least minimum plays or more depending on his or her ability to contribute.
 2. If there are **two** or more excused absences in a week it will be at the discretion of the head coach as to whether or not the player/cheerleader will be able to participate in Saturday/Sunday's game/competition. This will be a safety call based on the player/cheerleaders mental and physical preparedness upon returning to his/her sport.
 3. While in some instances a doctor's note may be required in order to return to play, this does not supersede a decision made by the head coach when determining eligibility on game/competition day.
 4. The only people who can make any exception to the above following policies are either the football or cheering director.
 5. It is the responsibility of the player/cheerleader/parent to inform a coach or team mom of any practice that is going to be missed whether it is going to be excused or not.
- **An unexcused absence:** an absence that does not warrant a valid reason for a missed or multiple missed practices, for example, a birthday party or a social gathering.
 1. If **one** unexcused absence occurs, the player/cheerleader may/will be subject to getting only minimum plays at the coach's discretion.
 2. If **two** or more unexcused absences occur, the player/cheerleader will be asked not to dress for Saturday/Sunday's game/competition.
 3. The only people who can make an exception to the above following policies are the football or cheering coordinator.

It is the responsibility of the player/cheerleader/parent to inform a coach or team mom of any practice that is going

Participant's Name _____

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Date Signed: _____

Billerica Pop Warner Social Media Policy

Billerica Pop Warner (BPW) recognizes the importance of the Internet in shaping the public's perception of our organization. BPW also recognizes the importance of our Board members, coaching staff, volunteers, parents/guardians and participant in leading and setting the tone of social media interactions in a manner that advances BPW's mission and goals.

Mission Statement

BPW is dedicated to the development of well-rounded youth through positive sports competition. We strive to develop fundamental skills through active participation of our players and to promote good sportsmanship from our players, coaches, and parents.

Applicability

This Social Media Policy applies to all Board members, all coaching staff, volunteers, parents/guardians and BPW participant. This Social Media Policy applies to all social media content posted by BPW Member in their professional and person capacity to the extent such content is related to BPW

Aspirations

BPW strives to create a positive and inclusive organization that is dedicated to helping young athletes reach their potential. In furtherance of this goal, BPW aspires to engage members of the Billerica Community in a positive, honest, transparent, and knowledgeable dialogue about BPW through social media. BPW views social media as an important tool for communicating its successes and opportunities for athletic and individual development.

Guidelines

All BPW Board members, all coaching staff, volunteers, parents/guardians and participant shall abide by the following guidelines when using social media:

1. Be positive and respectful, and always take the high road. When disagreeing with others' opinions, remain appropriate and polite. If you find yourself in a situation online that is becoming antagonistic, ask the BPW President for advice on how to disengage from the dialogue in a polite and respectful manner that reflects well on BPW.
2. Do not post content that would harm BPW or damage BPW reputation. Remember that even while you are on your own personal time, you are a representative (*Board member, coach, volunteer and/or parent/guardian and participant*) of BPW.
3. Use good judgment when posting comments on any official BPW sites. Bear in mind that our comments can create liability for BPW. If you are unsure whether a comment is appropriate to post, either do not post it or obtain prior approval from BPW President.
4. Encourage others to engage in positive interactions on social media. If you are concerned about any BPW Member's use of social media, please bring your concerns to BPW President.
5. Personally, identifiable information (information, such as name and date of birth and/or a street address which taken together, can identify a particular individual) should not be disclosed in any manner on official BPW social networking sites without the approval of BPW President.

Violations of the Social Media Policy:

BPW shall have the authority to monitor and enforce this Social Media Policy. The BPW Board of Directors, and any individual appointed by the Board of Directors, shall have the authority to remove any inappropriate or offensive comments from official BPW sites (including Facebook) and block any individual or organization from posting on any official BPW social media platform if they determine, in their sole discretion, that such removal or block is the best interest of BPW.

The failure of any BPW Board members, coaching staff, volunteers and/or parents/guardians and participant to adhere to this Social Media Policy shall be considered a violation of the BPW Code of Conduct, and any BPW Member who fails to adhere to this Social Media Policy shall be subject to disciplinary actions, up to and including termination of such individual's involvement in BPW, in accordance with BPW disciplinary procedures.

Print Name

Print Child's Name, if applicable

Signature

Date