

**VIRAL SPORTS FOOTBALL LEAGUE [VSFL] Paperwork Checklist**

**Program**: Football  **Regional Competition** [ ] **National Competition** [ ]

**Team ID #:** (refer to ***VSFL*** Team Profile) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LEVEL: **Prospects** 10 - 11 **U** [ ] **Pre-Varsity** 12 - 13 **U** [ ] **Junior Varsity** 14 - 15 **U** [ ] **Varsity** 14 - 18 **U** [ ]

**PARTICIPANT PROFILE INFORMATION PACKET:** All of the following forms must be submitted from **EACH** participant **\*in Roster Order\*** INITIAL and DATE

(ASSOCIATION) OFFICIAL ROSTER - Certified by ***VSFL***

(ASSOCIATION) MANDATORY PLAY ROSTER FORM 5 Copies

***VERIFY THAT THE BELOW FORMS ARE COMPLETED BY/FOR EACH PLAYER/PARTICIPANT on the ROSTER***

(PLAYER) Participant Photo ID (If not in your book, ID's to be on a ring and in roster order)

(PLAYER) Birth Certificate/Proof of Age (Copy acceptable if certified by ***VSFL***) and Report Card

(PLAYER) Medical Clearance Form/Sports Physical Form

(PLAYER) Emergency Medical Treatment, Consent and Information Form

(PLAYER) Resume Participation Medical Clearance Form

(PLAYER) Absentee Form *[if applicable]*

**Complete and submit the following forms for [EACH] Participant Profile Information Packet**

(ASSOCIATION) Copy of Conference Certified Team Roster

(ASSOCIATION) Affidavit: Concussion, Background Check & Coaches Training Affidavit MUST BE 2 MILLION LIABILITY COVERAGE

(ASSOCIATION) Scholastic Fitness Affidavit

(ASSOCIATION) Proof Of Insurance & Risk Management Agreement

(ASSOCIATION) VSFL Insurance Checklist (Only required if not insured by SADLER & Co. Insurance)

(PLAYER) Waiver & Release of Liability - MINOR (1) per participant - clipped in roster order

(PLAYER) Image Release Form - MINOR (1) per participant - clipped in roster order

(COACH/VOLUNTEER) Waiver and Release of Liability - ADULT (1) per participant

(COACH/VOLUNTEER) Image Release - ADULT (1) per participant

**Page 1 of 2**

**2018 VIRAL SPORTS FOOTBALL LEAGUE [VSFL] CERTIFIED PAPERWORK CHECKLIST**

**COPY/PRINT ONE CHECKLIST PER TEAM. PAGE 1 OF THIS CHECKLIST MUST BE INCLUDED IN TEAMS CERTIFIED ENVELOPE. PAGE 2 MUST BE HANDED IN TO *VSFL* ADMINISTRATION PRIOR TO FULL CONTACT PRACTICE OR GAME. TEAM MUST UPDATE ROSTER INFORMATION AS NEEDED BEFORE NATIONAL CHAMPIONSHIPS. In order for a team to be eligible for Regional/National Competition all mandatory forms/paperwork in the list below must be certified**

Conference:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Association:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Team/Association Representative

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Questions/ Concerns/ Any issues to inform VSFL HQ? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Are all proper forms included in the Participant Profile Information Packet? **YES / NO**

Are there any missing forms? **YES / NO**

Are there any missing players from the roster? **YES / NO**

What is the cause for absent players? **•** Injury • Sick • Scholastic obligations

• Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Certified and Stamped:** **Yes/ No** *[administrative use only – below this line]*

I have reviewed the paperwork for this team to the best of my abilities and have accurately reported any discrepancies or concerns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date Signed:** \_\_\_\_\_/\_\_\_\_\_/\_20\_\_\_\_\_

**Administrative Stamp [certified]**

**Page 2 of 2**