



# Riverhead Police Athletic League

210 Howell Avenue, Riverhead, NY 11901  
Juvenile Aid Bureau - 631-727-3200 x273  
David J. Hegermiller - Chief of Police

## 2017 Football Registration

In Person Registration May 2 & 10  
Deadline - 5 /18/17

**In Person Reg & TRY ON Uniform**  
**May 2 & 10 \* 7 - 9 PM**  
**@ Senior Center**  
60 Shade Tree Ln., Aquebogue  
**Payment: EXACT cash or**  
**check payable to Riverhead PAL**  
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**MUST complete reverse side →**  
**PAL Code of conduct**

Child's DOB\* \_\_\_\_\_ Grade Entering FALL 2017: \_\_\_\_\_  
Print LAST Name, first name above \*\* Player is Age as of Nov. 15, 2017 -- MUST BE 7, but not 14 by Nov. 15, 2017 \*\*

CIRCLE AGE as of Nov 15 :      7      8      9      10      11      12      13

Street \_\_\_\_\_ City \_\_\_\_\_ 2016 Coaches Name \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Email \_\_\_\_\_ [ ] YES [ ] NO  
Interested in Coaching ?

Cell # Father \_\_\_\_\_ Cell # Mother \_\_\_\_\_ Home # \_\_\_\_\_

Emergency Contact Name/Relationship \_\_\_\_\_ Cell # \_\_\_\_\_

**Ages: 7 - 13 YEAR OLDS - All Ages KEEP Jersey**  
**\_\_\_\$190 Town Resident \_\_\_\$200 Non-Town Resident**

Please attend IN Person 5/2 or 5/10 & TRY ON Jersey, Pant & Girdle.  
Bring TRY ON Form home with correct sizes, if you choose to register online.

**Player's LAST NAME above will be printed on Jersey**

**LIST 3 JERSEY #s: # \_\_\_\_\_, # \_\_\_\_\_, # \_\_\_\_\_**

If 3 different #'s are not listed, the PAL Office will choose # for your jersey.

<b>JERSEY</b>	<b>YOUTH</b> _____ small _____ med _____ large _____ x-large
	<b>Chest: 24-26      27-29      30-32      33-35</b>
	<b>ADULT</b> _____ small _____ med _____ large _____ x-large
	<b>Chest: 33-35      37-39      41-43      45-47</b>
	_____xx-large      _____xxx-large
	<b>49-51      53-55</b>

<b>GIRDLE</b>	<b>YOUTH</b> _____ small _____ med _____ large _____ x-large
	<b>Waist 20-22      23-25      26-28      29-31</b>
	<b>ADULT</b> _____ small _____ med _____ large _____ x-large
	<b>Waist 28-30      31-33      34-36      38-40</b>
	_____xx-large      _____xxx-large
	<b>42-44      46-48</b>

<b>PANT</b>	<b>YOUTH</b> _____ small _____ med _____ large _____ x-large
	<b>Waist 20-22      23-25      26-28      29-31</b>
	<b>ADULT</b> _____ small _____ med _____ large _____ x-large
	<b>Waist 28-30      31-33      34-36      38-40</b>
	_____xx-large      _____xxx-large
	<b>42-44      46-48</b>

[ ] **NEW Football Player** \*NEW Football Players must submit a Notarized Affidavit of Original Birth Certificate or BRING the Original Birth Certificate with you to In Person Reg Night. A Notary will be available to review the Birth Certificate and notarize the Affidavit. Note PDF forms below. Those registering by mail must attach the Notarized Affidavit of Original Birth.

PAL Office Use -BC Affidavit Rcvd Date: \_\_\_\_\_ / \_\_\_\_\_ / 2017

[ ] **Returning Football Player**

CIRCLE age when player started PAL FB:  
Age: 7 / 8 / 9 / 10 / 11 / 12

### Three ways to register your player:

- riverheadpalfootball.siplay.com**  
Starting 5/2 register online. Consider attending TRY ON Uniform night before registering online. Note: credit card processing charges apply. Online registration closes 5/18/17.
- In Person 5/2 or 5/10 @ 7-9 PM at Senior Center, 60 Shade Tree Lane, Aquebogue.** Notary will be available to notarize NEW Player Affidavit.
- Mail Paper Registration & Payment with:**
  - Code of Conduct Form** (reverse side)
  - Family Account Information Form (FAIF) -only**  
if you have not previously done so. You must submit FAIF with a copy of **current** Proof of Residency to establish your account.

PDF forms available at PAL Office or Go to townofriverheadny.gov, Local Links, Hot Links, Go to Juvenile Aid Bureau, scroll down to PAL.

I, the parent/guardian of the above named child, hereby give my consent for participation in the above activity and do claim that he/she is in perfect physical condition to participate in said activity. Furthermore, I, the parent/guardian of the above named candidate for a position on a league team hereby give my approval to his/her participation in all league activities during the current season. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and I do hereby waive, release, absolve, indemnify and agree to hold harmless the Riverhead Police Athletic League, associated organizations, the organizers, sponsors, supervisors, participants and persons transporting my/our son/daughter, except to the extent and in the amount covered by an accident or liability insurance. I agree to return within 7 days or sooner, after notification, the uniform and other equipment issued to my/our son/daughter is in as good condition as when received, except for normal wear and tear, or pay the equivalent to cost.

Parent Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date: / /

PAL Office Use Only: CASH / CHECK Name: \_\_\_\_\_ Date: \_\_\_\_\_ 2017

Entered: \_\_\_\_\_ 2017 CHECK / RECEIPT # \_\_\_\_\_ Amount \$ \_\_\_\_\_



### RIVERHEAD P.A.L. CODE OF CONDUCT

**PLAYER:** Any player not adhering to the general rules of a game may be removed from a said game at the discretion of the coach. Use of profanity, acts of violence, taunting, intimidating or any other act of disrespect will not be tolerated.

Any player suspended from a game or event will have to remain suspended for one (1) additional game or event before returning to full capacity. The player must actually attend the game or event he/she was suspended from. The suspension will not be considered fulfilled unless the player actually attends this suspended game. Participation at practice during this suspension time is mandatory.

Any player suspended a second time during the course of any one (1) season will face disciplinary action by the PAL Representative. This may include the termination of the participant. **ALL DECISIONS WILL BE FINAL**

**PARENT/ GUARDIAN:** Any parent/guardian not adhering to the rules of a game or event will be asked to leave the playing field or event area. Failure of the parent/guardian to cooperate will result in the removal of the parent/guardian’s child from the game or event. If the parent/guardian still refuses to cooperate, the child will be suspended from the game or event. See “Player Rules of Conduct” above for procedure.

If a parent/guardian violates these rules of conduct a second time, it may result in the termination of the child participant. This decision will be made by the P.A.L. Liaison. **ALL DECISIONS WILL BE FINAL.**

Parent/Guardian Sign Name: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

### *Suffolk County Police Athletic League Player’s and Parents Ethics Pledge*

Player’s name: \_\_\_\_\_

*The Suffolk County Police Athletic League has adopted a zero tolerance policy for violence. This includes physical acts of violence, threats of violence or threatening behavior. A violation committed by any participant (player, coach, referee), parent or fan, will result in immediate expulsion for the league and a fine to the organization from which he/she belongs. The following will bring to your attention the type of behavior we hope and expect from our parents. Please read, sign and follow the pledge for a safe and enjoyable season for your child.*

1. I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game or practice.
2. I will emphasize skill, development and practices and how they benefit my child over winning.
3. I will refrain from coaching my child or others during games and practices unless I am an official coach.
4. I will inform the coach of any physical disability or ailment that may affect the safety of my child or others.
5. I will place the emotional and physical well-being of my child ahead of a personal desire to win.
6. I will support my organization, our coaches and officials working with my child, to encourage a positive and very enjoyable experience for everyone.
7. I will demand a sports environment for my child that is free of drugs, tobacco and alcohol and will refrain from their use at all Suffolk County P.A.L. sporting events.
8. I will ask my child to treat other players, coaches, officials and fans with respect regardless of race, sex, creed or ability.
9. I will respect the officials and their authority during games and will not question, discuss or confront coaches at the game field. I will speak with coaches at an agreed time and place
10. I will not engage in any unsportsmanlike conduct with any official, coach, player or parent, such as booing and taunting, refusing to shake hands, or using profane language or gestures.
11. I will help my child enjoy this experience by doing whatever I can, such as being a respectful fan, becoming an assistant coach, provide transportation, anything you can do that’s Positive.
12. Let the coaches’ coach – let the officials officiate and above anything else; **LET THE CHILDREN PLAY.**
13. I will be responsible for the conduct of all guests that I bring to my child’s game.
14. I will remember that this is just a game. Let your child dream his own dreams, let your child **PLAY** and have fun.

**Thank you for your cooperation and have a great season.**

Parent/Guardian Sign Name: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

#### PLAYER’S CODE OF ETHICS

- I will encourage good sportsmanship from my fellow participants at every game and practice by demonstrating good sportsmanship.
- I will attend every practice and game that I can and will notify my coaches if I cannot
- I will do my best to listen and learn from coaches.
- I will treat my coaches, other players, officials and fans with respect regardless of race, sex, creed or abilities and I expect to be treated accordingly.
- I deserve to have fun during my P.A.L. experience and I will tell my parents or coaches if it stops being fun.
- I will encourage my parents to be involved with my activity in some capacity because it is important to me.
- I will do my best in school.
- I will remember that my participation in P.A.L. is an opportunity to learn and have fun.

\_\_\_\_\_  
Players Signature

## **2017 RIVERHEAD PAL WAVES FOOTBALL REGISTRATION**

**In Person “Try on Uniform” Registration Night:**

**Tuesday, May 2 and Wednesday, May 10**

**Time: 7-9 PM at Senior Citizen Human Resource Center**

**60 Shade Tree Lane, Aquebogue**

**FOOTBALL - Ages 7 – 13 by November 15, 2017**

**Football Players- register in person, mail or on line at [riverheadpalfootball.siplay.com](http://riverheadpalfootball.siplay.com)**

**If you choose to register online, please attend “Try On Uniform” Registration Night first, bring Form home with correct sizes.**

**Deadline May 18, 2017.**

**New Players must submit a Notarized Affidavit of Original Birth Certificate. You may bring your players original Birth Certificate with you to In Person Reg Night. A Notary will be available to review the Birth Certificate and notarize the Affidavit.**

**Practice Tues & Thurs, 6:00–7:30 PM @ Stotzky Park, 55 Columbus Avenue, Riverhead Starting July 18 through Summer & continuing through Fall.**

**Games Start: Sundays – September 10 through November 12**

**10 Games – Sundays – Starting September 10 through November 12**

**(Game times vary weekly)**

**Game Locations – Away Games located at various fields throughout Suffolk County. Home Games located at football field behind Riverhead High School, 700 Harrison Avenue, Riverhead.**