

Football Athlete Identification & Weight Card

Team Affiliation:		
Athlete Name:		
Physical Address:		
City:	Zip:	
School:		DOB:
Phone Number:		
Medical Conditions:		

Year Completed:	
Level/Div:	_
Conference Grade: Conference Age:	_
Jersey No.:	
Photo:	

TEAM CONFIRMATION OF INFORMATION

Player is registered currently with team as noted above and we certify that the information on this card is accurate. This player meets all conference eligibility requirements as referenced in the MVFL Constitution to participate during the current season.

League Representative	Date
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 $\underline{\textbf{Certification of this card requires one signature from another MVFL} \ \textbf{Organization}$

Organization _______ Signature _______ Date______

Game day Records: ALL players must follow check-in/ weigh in procedures per MVFL Constitution. Records must be kept accurate through entire season. All players must have initial and date from opposing teams weigh master or authorized check-in person on each participating game day prior to game to verify elligibility.

Check-in/ Weigh-in Certification									
Week	Weight	Date	Initials	Week	Weight	Date	Initials		
Jamboree)			8					
1				9					
2				10					
3				11					
4				Playoff #1					
5				Playoff #2					
6				Superbowl					
 7									