



VIRGINIA UNITED YOUTH FOOTBALL AND CHEER ORGANIZATION MEMBERSHIP FORM

Organization Legal Name: _____

Team Name & Colors: _____

Contact Person: _____ Title: _____

Contact Person Phone # _____ Cell # _____

Mailing Address: _____

City/Zip: _____ Email Address: _____

Website Address: _____

Practice Field Location: _____ City: _____

Game Field Location: _____ City: _____

Teams Entering & Divisions: FOOTBALL

6 UNLIMITED _____ 7 UNLIMITED _____ 8 UNLIMITED _____ 9 UNLIMITED _____
10 UNLIMITED _____ 11 UNLIMITED _____ 12 UNLIMITED _____ 13 UNLIMITED _____
14 UNLIMITED _____

Teams Entering & Divisions: CHEER

(Will you have cheerleaders, please circle one) Yes No

CHEER CORDINATOR: _____ E-MAIL _____

PHONE # _____

Are You 501(c) (3)? (Circle one) Yes No

PRESIDENT: _____ SECRETARY: _____

VICE PRESIDENT: _____ TREASURER: _____

Paid \$300.00 Association (Circle one) Yes No

Was the (above) organization previously with another league / conference? Yes / No

Previous League / Conference Name _____

President's Signature

Date