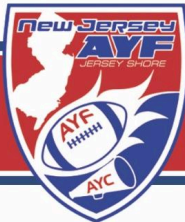


**NEW JERSEY AMERICAN YOUTH FOOTBALL
JERSEY SHORE CONFERENCE**



**1901 ROUTE 71 SUITE 3D, WALL, NJ 07719
INFO@NJAYF.ORG · WWW.NJAYF.ORG**

**PRESIDENT: KEVIN HESTER · FIRST VICE PRESIDENT: CHRIS PETRICH · SECOND VICE PRESIDENT: HOPE STEVENSON
THIRD VICE PRESIDENT: KELLY BIALOBLOCKI · TREASURER: DANIEL VALLE · SECRETARY: TINA CERTO · SERGEANT AT ARMS: BOB COATES
FOOTBALL COMMISSIONER: CHRIS MAYNARD · ASSISTANT FOOTBALL COMMISSIONER: MICHAEL LILOIA
CHEER COMMISSIONER: MARY ELLEN EARP · ASSISTANT CHEER COMMISSIONER: ALICIA CROTZER**

This form is necessary for the team to be eligible for NJAYF team average consideration.
Missing or incomplete report cards will be assigned a 69% average.

PLEASE PRINT LEGIBLY & FILL OUT COMPLETELY

Association Name:
Team Name:
If multiple division teams, indicate how team is distinguished, eg color:
Contact Person:
Phone:

FOOTBALL **CHEERLEADING** **DANCE**

9U **10U** **11U** **12U** **13U** **14U**

TOTAL NUMBER OF ATHLETES ON OFFICIAL TEAM ROSTER: _____

TOTAL NUMBER OF ATHLETES ELIGIBLE FOR POSTSEASON PLAY: _____

(This would include those with complete report cards and/or completed school certification form)

Calculate team average. Do not include mascots or drops. Assign 69% to incomplete or missing report cards, assuming school certification _____ form has been completed. Carry average to three (3) decimal places.

Association Scholastic Representative Signature: _____

Date: _____