



K-6 Football Player Registration Form

(Separate form and Waiver required per player)

Player's Name	Nickname _____
Date of Birth	/ / Age today _____ Grade entering _____
Gender	Male ___ Female ___
Address	
Address 2	
City, State, Zip	
Home Phone	Cell Phone
Resident of:	County Township
E-mail	

Parent #1	
Name	
Home Phone	
Cell Phone	
E-mail	
Are you willing to coach?	Yes ___ NO ___ (If yes, Background check form required)

Parent #2	
Name	
Home Phone	
Cell Phone	
E-mail	
Are you willing to coach?	Yes ___ NO ___ (If yes, Background check form required)

Emergency Contact	
Relationship to player	
Insurance Carrier	
Policy Number	Ins Phone#

FOR OFFICE USE:

Registration Fee: Player Fee \$40.00 / Sibling \$20.00 / Equipment Deposit \$150.00 <i>Please write separate check for equipment deposit as it will be returned when equipment is turned in</i>	
Total Paid _____	Check # _____ Cash _____ Visa/MC# _____ exp. /
Liability Waiver Signed?	Yes No
Equipment Sizes	Helmet _____ Shoulder Pads _____ Jersey _____ Pants _____

Comments: