CHARGERS FOOTBALL CLUB

PLAYER REGISTRATION FORM - 2019
ATOM (BIRTH YEARS 2009, 2010 AND 2011)

NAME _____

ADDRESS _____ POSTAL CODE _____

PHONE NUMBER _____ BIRTHDATE (MM-DD-YY) _____

E-MAIL: PARENT _____ PLAYER _____

AGE (Dec 31, 2019) _____ HEIGHT _____ WEIGHT _____

SCHOOL (Sep 2019) _____ GRADE (Sep 2019) _____

FAMILY DOCTOR _____ PHONE NUMBER _____

HAVE YOU EVER HAD A CONCUSSION? _____ WHEN _____

ALLERGIES _____

LIST ANY MEDICATION YOU ARE NOW TAKING _____

To be completed by Parent/Guardian

MOTHER'S NAME _____

ADDRESS _____

PHONE NUMBERS - HOME _____ WORK _____

FATHER'S NAME _____

ADDRESS _____

PHONE NUMBERS - HOME _____ WORK _____

I hereby certify that I am the parent or legal guardian of _____ and that I give my full consent for him to play football for the Chargers Football Club (Atom team) and that the date of birth and player's home address in the above statement are correct. I am also advised that I will be held fully liable to replace all equipment (approximate value $750) issued by the team to _____ _____(name of player).

Fees for the Spring Camp are $75. **These are non-refundable.** Registration fees for the regular season are $300. (After July 1 they are $350) All parents agree to participate in three fundraisers for the organization.

If, in the event a player is released by the club, prior to the first regular season game, a refund of $200 will be issued (balance is for administration cost). **No refunds will be given to players who quit or to players who are released because of disciplinary action by the club.**

Signature of Parent/Guardian _____ **Date** _____