CHARGERS FOOTBALL CLUB

PLAYER REGISTRATION FORM - 2019 BANTAM (BIRTH YEARS 2004, 2005 AND 2006)

NAME		
		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 COM	NCUSSION?	WHEN
ALLERGIES		
LIST ANY MEDICATION YOU	ARE NOW TAKING	
	To be completed by	y Parent/Guardian
MOTHER'S NAME		
ADDRESS		
PHONE NUMBERS - HOME_		WORK
FATHER'S NAME		
ADDRESS		
PHONE NUMBERS - HOME_		WORK
and that I give my full consent that the date of birth and play that I will be held fully liable to b Fees for the Spring Camp are are \$350. (After July 1 they organization. If, in the event a player is released	for him to play footbal er's home address in t replace all equipment (a \$75. <u>These are non-r</u> are \$400) All paren used by the club, prior to ninistration cost). <u>No</u>	of

Signature of Parent/Guardian	C)ate	