CHARGERS FOOTBALL CLUB

PLAYER REGISTRATION FORM - 2019 PEEWEE (BIRTH YEARS 2007 AND 2008)

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 CONCUSSION?	WHEN	
ALLERGIES		
LIST ANY MEDICATION YOU ARE NOW TA	KING	
To be com	pleted by Parent/Gua	rdian
MOTHER'S NAME		
ADDRESS		
PHONE NUMBERS - HOME		VORK
FATHER'S NAME		
ADDRESS		
PHONE NUMBERS - HOME		VORK
I hereby certify that I am the parent or legal guand that I give my full consent for him to play that the date of birth and player's home add that I will be held fully liable to replace all equipares for the Spring Camp are \$75. These are \$350. (After July 1 they are \$400) organization. If, in the event a player is released by the club be issued (balance is for administration costs).	y football for the Cha lress in the above sta ipment (approximate (name of re non-refundable. All parents agree to b, prior to the first reg st). No refunds will	rgers Football Club (Peewee team) and atement are correct. I am also advised value \$750) issued by the team to player). Registration fees for the regular season participate in four fundraisers for the regular season to be given to players who quit or to
players who are released because of disci	piniary action by the	<u>: CIUD.</u>
Signature of Parent/Guardian		Date