



EXTREME TEAM SPORTS



NFL YOUTH FLAG FOOTBALL (Boys & Girls) Spring REGISTRATION

Registration Fee: \$135 (1st Child) \$ 115 (2nd Child) \$95 (3rd & 4th Child)

Fundraiser: **NO FUNDRAISER (Spring League)**

League Divisions: 4 & 5 Yr Old (Age as of Apr. 1) - 6-8 Yr Old - 9-11 Yr Old - 12-14 Yr Old (Age as of Mar. 21)

Note: 3 yr olds are eligible as long as they turns "4" on or before **Apr. 1** 12 & 14 yr olds – "14 Yr Old" Must NOT turn 15 before **Mar. 21**

PLAYER INFORMATION	Players Name:	Male / Female:	Date Of Birth:	Age: (At time of registration)
	School:	Grade:	Player Lives With: _____ Both Parents _____ Mother _____ Father _____ Other	
	Players Jersey Size: YS, YM, YL, AS, AM, AL, AXL, A2XL	Age Division: _____ 4 & 5 Year Old _____ 6-8 Year Old _____ 9-11 Year Old _____ 12-14 Year Old		
	Flag Football Experience: _____ None / _____ Yes, I've played _____ # of Years / _____ Did _____ Did Not Play this past Fall.			

FATHER	Fathers Name:	Phone: (Home)	Phone: (Work)	Phone: (Cell)
	Address:		City:	Zip:
	Email: (IMPORTANT! Please Print Legible)			

MOTHER	Mother Name:	Phone: (Home)	Phone: (Work)	Phone: (Cell)
	*Address: (If Different From Above)		City:	Zip:
	Email: (IMPORTANT! Please Print Legible)			

VOLUNTEER	I am interested in Volunteering as: _____ Head Coach _____ Assist. Coach _____ Team Mom _____ Volunteer			
	Note: Returning Coaches receive first choice. _____ I Coached Last Fall. Team Name: _____ Age Div.: _____			
	Name: _____	Email: _____	Cell# _____	

In return for my child ("Participant") being allowed to participate in the Extreme Team Sports event(s) (the "Event(s)" "NFL Youth Flag Football"), I release and agree not to sue Extreme Team Sports, and their Directors, coaches, officials, employees, sub-contractors, sponsors, agents and affiliates from all present and future claims that may be made by the Participant or me, my family, estate, heirs or assigns for property damage, personal injury or wrongful death arising as a result of the Participant's participation in the Event(s) and caused by the ordinary negligence of the parties listed above, wherever, whenever or however the same may occur. I understand and agree that those listed above are not responsible for any injuries or property damage arising out of the Event(s), even if caused by their ordinary negligence. I understand that participation in the Event(s) involves certain risks, including, but not limited to, serious injury. I am voluntarily allowing Participant in the Event(s) with the knowledge of the danger involved and agree to accept all risk of such participation.

I certify that the Participant is in excellent physical health and may participate in strenuous and hazardous physical activities, including the sport (Football) to be played in the Event(s). Permission is granted for Participant to receive emergency medical treatment, if needed. I also agree to indemnify and hold harmless those listed above for all claims arising out of Participant's participation in the Event(s) and all related activities. I agree to let the parties use Participants name and likeness free of charge in any manner, and for any purpose without compensation to me or Participant. I understand that this document is intended to be broad and inclusive as permitted by the laws of the state in which the Event(s) is taking place and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect. I further agree that any legal proceedings related to this waiver will take place in Chambers County, Texas.

I understand that Extreme Team Sports, their employees, sub-contractors, volunteers, sponsors, and affiliates have the right to remove participants, family, friends or anyone attending an event from games, the league or programs with or without cause and I release and agree not to sue Extreme Team Sports, their employees, sub-contractors, volunteers, sponsors, or their affiliates.

I am the parent or legal guardian of the Participant. I am of legal age and am freely signing this Agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies. I represent that I am parent/legal guardian of the child named above, and I agree that the terms of this release are binding on me and my child.

NO FUNDRAISER FOR SPRING LEAGUE PLAY.

Parent/ Legal Guardian Signature: _____ Date: _____

Make Check Payable To: Extreme Team Sports (1 Player - \$135 2 Players - \$250 3 Players - \$345 4 Players - \$400)

Payment: Amount _____ Cash _____ Check # _____ Receipt Number _____