

Junior Football League of Westerville 2011 Registration Form

Please complete the form. You may mail it, along with your check to

JFLW. PO Box 1122. Westerville, Oh 43086.

Or you may bring it to Registration June 6th - 8th from 5:00 – 8pm at the Westerville Rec Center.

Please Print Carefully

Registration # _____

Name: _____ Age: _____ DOB: ___/___/___ Weight: _____

Address: _____ City: _____ Zip: _____

Fall 2011 Grade: _____ Name of School: _____

Parent Name: _____ Phone: _____ Email Address: _____

Parent Name: _____ Phone: _____ Email Address: _____

Are you a returning player? Yes / No. If so, what team did you play for? _____

Returning Players only: Do you wish to go back to your team or go into the draft? Team / Draft.

What League are you signing up for? Pony / Bronco. (If Pony, a copy of the top of current year grade card required.)

Pony League consists of 3rd and 4th graders. Bronco League consists of 5th and 6th graders.

Exception #1 - A 4th grader who weighs over 149 will move up to the Bronco League.

Exception #2 - A 5th grader who weighs under 90 lbs may chose to play at the Pony League.

THE REGISTRATION FEE FOR THE FIRST CHILD IS \$180. SECOND CHILD IS \$90.

PLEASE MAKE ALL CHECKS PAYABLE TO J.F.L.W.

I/We, the parent(s)/legal guardian(s) of the above named youth, who is a registrant of the Junior Football League of Westerville, Inc., hereby give my/our approval of and consent to his/her participation in any and all activities of the league. I/We assume all risks and hazards incidental to the activities of said program and I/We do hereby release, acquit and forever discharge and agree to indemnify and save harmless the Junior Football League of Westerville, Inc., its coaches and officers and all other persons assisting in the conduct of said activities.

I/We understand that because of prohibitive costs and the unnecessary duplication of coverage, no accident, health, medical or life insurance covering the participants in the Junior Football League of Westerville, Inc. will be procured by the league and that my/our consent to the participation of the above named youth in this program is made with this understanding.

My/Our signature(s) below indicates that I/We have read, understand and accept the previous two paragraphs.

Parent or Legal Guardian Signature: _____

Do you have hospitalization? Yes / No. Date: ___ / ___ / 2011

Please visit www.JFLW.org for more information and dates.

For official league use only.

Check Number: _____ Check Amount: _____ Payment verified by: _____

Official Weight: _____ Grade Card Reviewed: _____