

ADDISON COWBOY FOOTBALL

ADDISON RECREATION CLUB FOOTBALL AND CHEERLEADING SIGN-UP

www.addisonrecclub.com



NEW _____

PARTICIPANTS NAME: _____ LAST YEARS LEVEL _____

ADDRESS: _____

TOWN: _____ ZIP CODE: _____ PHONE: (_____) _____

E-MAIL: _____ DATE OF BIRTH: _____ AGE ON 7-31-11 _____

GRADE IN SEP. 2011: _____ PARTICIPANTS WEIGHT (FOOTBALL ONLY) _____

JERSEY SIZE: YS ___ YM ___ YL ___ YXL ___ AS ___ AM ___ AL ___ AXL ___ A2XL ___ A3XL ___
(FOOTBALL ONLY)

NUMBER REQUEST: 1ST _____ 2ND _____ 3RD _____

(Due to the amount of teams and participants we have, you may not receive any of your choices, as we cannot have multiple numbers on the same team.
We will do the best we can to accommodate everyone.)

FOOTBALL: \$175 _____

CHEER : \$130 _____

INTERESTED IN HELPING WITH FOOTBALL

INTERESTED IN HELPING WITH CHEERLEADING

FOOTBALL- RON MAXWELL: 630-782-6131 MAXRON61@AOL.COM

CHEER – CLAUDIA SANTOS: 630-222-2971 ADDISONCOWBOYSCHER@HOTMAIL.COM

AGE ON 7-31-11

MAX. WEIGHT

BANDIT (Ages 5- 6-7 Age on 8-31-11)	85LBS.
MITEY-MITE (Ages 8-9)	95LBS.
CADET (Ages 8-9)	100LBS..
JR. PEE-WEE (Ages 8-9-10)	110LBS.
PEE-WEE (Ages 9-10-11)	125LBS.
JR. MIDGET (Ages 10-11-12)	140LBS.
ALL-AMERICAN (Ages 11-12-13-14)	Over 140LBS.

Copy of birth certificate required for first time participants—Participation in our fundraising raffle is mandatory for all participants.

I/We the parent(s) of the above-named boy/girl, hereby give my/our approval to his/her participation in any and all of the activities of the Addison Recreation Club during the current season. I/We assume all risks incidental to the conduct of the activities and transportation to and from the activities. I/We do further hereby release, absolve from indemnity and hold blameless the Addison Recreation Club, the organizers, the sponsors and the supervisors, any or all of them, in case of injury to my/our son/daughter. I/We hereby waive all claims against the organizers, the sponsors, or any supervisors appointed by them.

I/We likewise release from responsibility any person transporting my/our son/daughter to or from the activities.

I/We will furnish a birth certificate for the above named candidate upon request of the Addison Recreation Club.

II/We the parents of the above-named boy/girl, in case of emergency and/or injury in my/our absence, hereby authorize any hospital and/or attending physician to give any emergency medical attention or treatment deemed necessary.

I/We further hereby release, absolve, from indemnity and hold blameless any hospital and/or physician treating the above-named boy/girl in my/our absence.

Family Physician: _____ Phone Number: _____

Fathers Signature: _____ Mothers Signature: _____

Payment Terms: Check No. _____ Cash _____

THIS IS NOT A SCHOOL SPONSORED ACTIVITY