

LSAA 2012 Flag Football Registration

Please Print All Information

Players Last Name _____

Players First Name _____

Male or Female _____

Date of Birth _____

Age as of 3/1/2012 _____

Age Division (circle one) (5-6) (7-8) (9-11) (12-14) _____

Mothers Name _____

Fathers Name _____

Is a Brother or Sister Playing? If Yes,
please list each child. _____

Address _____

City _____

Township _____

State _____

Zip Code _____

Best Phone Number to contact you _____

E-Mail Address _____

School _____
Jersey Size youth s,m,l, adult s,m,
l,xl,xxl _____

Is Parent able to Coach? (Yes or No) _____

Note:

Be advised that teams are selected based on an evaluation process of all players. This process is in place to insure there is an even balance of talent on each team. The teams are selected by the coaches. There is no guarantee that players will be assigned to the same teams as their friends or a desired coach. It is also not possible to assign players to the same team for ride sharing purposes. Unfortunately, these requests cannot be granted.

Parent or Guardian Signature _____

Date _____