

# Wilson Flag Football Program Registration:

**Athlete Name:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade: (entering in fall of '22)** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Phone - Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Shirt/short size (youth sizes)(come as set)**

\_\_\_ **XS**    \_\_\_ **S**    \_\_\_ **M**    \_\_\_ **L**    \_\_\_ **XL**

**Last Name as you want it on jersey:**

\_\_\_\_\_

**Number you want on jersey:**

\_\_\_\_\_

## **PARENT/GUARDIAN CONSENT FORM**

I hereby give my consent for my son to participate in all activities of the Wilson Flag Football Program. I also declare my son to be in good health and give permission to the coaches to render such medical care, as in their judgment, may be advisable for my child.

\_\_\_\_\_  
**Signature: Parent / Guardian**

\_\_\_\_\_  
**Date**

Please complete the form above and return to Doug Dahms with a \$85 check. **(Registration deadline is August 27; late registration is \$100 by September 3; after September 3 registration is \$85 but no uniform is included)**

Please make checks payable to **Wilson Football**.

Forms may be returned to:

**Wilson Football**  
c/o Doug Dahms  
2601 Grandview Boulevard  
West Lawn, PA 19609-1324