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|  | **Alleman Booster Boys**  **Jr Pioneer Flag Football** |  |
| ***2019 REGISTRATION FORM – FLAG FOOTBALL (4th-3rd Grade) PROGRAMMING*** | | |
| **PLAYER INFORMATION**  (First):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Middle): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE: ­­­­­­\_\_\_\_\_\_ Height: ­­­­­­\_\_\_\_\_\_\_ Weight: ­­­­­­\_\_\_\_\_\_\_\_  City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Birth:\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **I would prefer to practice** (5:30-7:00pm) Monday & Wednesdays \_\_\_\_\_\_\_ Tuesdays & Thursdays \_\_\_\_\_\_\_ | | |
| **MEDICAL INFORMATION:** *(please list any medical conditions which need to be noted when participating in an athletic activity as well as past injuries that needed medical attention and year)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **FAMILY/EMERGENCY INFORMATION:**  **Parent** Father:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Info:** e-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone: (\_\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other Family Member playing a role in transportation and support for participation? Yes \_\_\_\_\_\_\_  Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone: (\_\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Emergency Contact Best Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Sunday, August 18th @ Alleman HS Casey Gym**  **12:30 Program Introduction followed by 1:00 – 2:30 Registration**  **Pre-Registration Available (see below)**  **REGISTRATION FEES AND INCLUSIONS: Your registration fee will cover** use of a game jersey and a mouthpiece as well as field equipment use including football, flags, etc. Plastic cleats are recommended but not included. This fee also includes 7-8 weeks of quality instruction and mentoring from Alleman Booster Boys coaches. The fee ends up costing less than $1/hour for the tremendous growth opportunities available, coaching services and fun that is offered.  **Alleman Feeder School - $25 Non-Alleman Feeder School - $35**  *Alleman Booster Boys has a financial assistance for those who demonstrate need. Please inquire if applicable.*  Practices Begin Week of August 26th – 5:30 at Alleman Complex 1186 43rd Avenue, Moline (southside) | | |
| **With check or money order return this completed form to Alleman Football Head Coach,**  **c/o Alleman High School Football Office, 1103 40th Street, Rock Island IL 61201**  **or email to Coach DePoorter at** [**tdepoorter@allemanhighschool.org**](mailto:tdepoorter@allemanhighschool.org) **(fee collected later)** | | |

**For more information visit** [**www.allemanboosterboys.com**](http://www.allemanboosterboys.com) **or contact** [**director@allemanboosterboys.com**](mailto:director@allemanboosterboys.com)

**Player Name: Fall ’19 Grade:**

**ALLEMAN BOOSTER BOYS PARTICIPATION - INFORMED CONSENT**

As I enroll my son for participation, from observing and/or playing football I am aware of and acknowledge that injuries can happen. I also accept the risk of injuries that are a possibility to participants.

Per what will be communicated to him by coaches, I have instructed my son that if during practice he feels uncertain, uncomfortable, or in any pain he will immediately bring this to the attention of an ABB coach on site. In addition, if in the event my son is removed under suspicion of concussion, I understand that he cannot return to practices or game until cleared by a doctor or the Alleman athletic trainer.

Alleman High School, the Alleman Booster Boys program and its coaches are NOT liable for any medical, dental or hospital bill occurring as a result of injuries sustained while participating on this team or its affiliated league.

I have or will discuss the relevant items above with my son has he has my permission to participate in the Alleman Booster Boys football program.

**Player Signature:**

**Parent Signature: Date:**