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**MADISON-RIDGELAND YOUTH CLUB
 TACKLE FOOTBALL REGISTRATION**
 PLEASE PRINT – ONE FORM PER PLAYER

Due to space limitations, Madison County residence will be given 1st priority.

Player's Name: (First) _____ (Last) _____ Date of Birth _____
 Father's Name _____ Mother's Name _____
 Street Address _____ City _____ Zip _____
 Parent's E-mail Address _____
 Home Phone _____ Work Phone Father _____ Work Phone Mother _____
 Cell Phone Father _____ Cell Phone Mother _____
 In case of an emergency – Name _____ Phone _____

REGISTRATION FEE: \$100 (INCLUDES JERSEY, you will be responsible for all other required equipment)

_____ Does your child have a physical/medical disability that needs special consideration?
 Please explain: _____
 _____ Does your child have a sibling(s) in the same age group that must play on the same team?
 Name: _____

On September 1, 2010 my child will be _____ years old.

SHIRT SIZE:

- _____ Youth Small
- _____ Youth Medium
- _____ Youth Large
- _____ Youth X-Large
- _____ Adult Medium
- _____ Adult Large
- _____ Adult X-Large
- _____ Adult XX-Large

WOULD YOU LIKE TO:

- _____ Head Coach
- _____ Assistant Coach
- _____ Sponsor the team (\$350)

***Please note—if you order the incorrect shirt size and wish to receive a different size; you will be responsible for the cost of the new shirt.

THE FOLLOWING MUST BE READ AND SIGNED FOR REGISTRATION TO BE VALID:

I/We, the parent(s) or legal guardian(s) of the above-named candidate for a position on a tackle football team, hereby represent that such child is in good health and can participate in competitive tackle football. I/We do further give my/our permission for such child to receive emergency medical and surgical treatment procedures of any kind and nature, which may be deemed advisable by any physician who may attend or treat such child at or during all tackle football related activities, including going to or coming from tackle football practice, activities or games. I/We hereby absolutely assume all risks and hazards incidental to such participation and release, absolve and full forgive and further agree to indemnify and hold harmless the Cities of Ridgeland, Madison and the Madison-Ridgeland Youth Club, and all persons and entities associated with the Cities of Ridgeland, Madison and the Madison-Ridgeland Youth Club including persons transporting my/our child to or from activities, from any and every claim, demand, action or right of action, of whatever kind or nature, either in law or in equity arising from or by reason of any injury known or unknown or death to my/our child or property damage whether the result of negligence or any other cause. Furthermore, I will allow my child's photo to be used on the MRYC website to promote the league.

THIS AGREEMENT IS GIVEN IN CONSIDERATION FOR MY/OUR CHILD'S BEING ALLOWED TO PARTICIPATE IN THE AFORESAID ACTIVITIES.

Signature of Parent or Guardian _____ Date _____

NO REFUNDS AFTER THE LAST DAY OF REGISTRATION (August 21, 2010)
Prior to Aug 21st – all refund request MUST be in writing to: titansportsmom@comcast.net