

South Callaway Youth Football Registration Form

\*\*REGISTRATION FEE ... \$75.00\*\*

Due: June 30, 2017

[After June 30, there is a \$25 late fee]

Student Name: \_\_\_\_\_ Grade (next year): 5<sup>th</sup> 6<sup>th</sup>

Home Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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Mother Name: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_  text msging?

Email Address: \_\_\_\_\_

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Father Name: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_  text msging?

Email Address: \_\_\_\_\_

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Health Insurance Information: (**must be filled out!**)

Name of Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

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Parent Help:

This program is as successful as it is because of parental involvement...we need parents to sign up for one committee to continue to make it a successful program.

Team Parent - Help coordinate team communications between league administrator, coaches and parents.

Game-day Operations Committee

Chain Gang

Gate Duty

End-of-year Celebration Committee

Fundraising Committee

Registrations should be mailed to league administrator:  
Shelly Sconce, 1194 Choctaw Ridge, Holts Summit, MO 65043