

Jr. Pirates Sports Assoc. Football Registration Form

www.jrpiratessports.org



Registration: (Check appropriate box)

5th Grade Football \$125.00 (10% discount to siblings)

6th – 8th Grade Football \$200.00 (10% discount to siblings)

We accept, cash, checks and major credit cards. \$25 fee on all returned checks

ALL Registrations must be paid in full by June 30th in order for your child to be on the roster.

STEP 1

Check one

STEP 2

Fill in Blanks

Player's Information:

Player's Name (please print): _____
(Last) (First)

School: _____ Grade in Fall: (circle one) 5th 6th 7th 8th

Home Address: _____

City: _____ Zip Code: _____

Date of Birth: _____ Age _____ Sex _____ Shirt Size YL, AS, M, L, XL, 2XL, 3XL

Parent Information:

Parent/Guardian Name 1: _____

Cell Phone 1: _____ Home Phone 1: _____

E-Mail Address 1: _____

Parent/Guardian Name 2: _____

Cell Phone 2: _____ Home Phone 2: _____

E-Mail Address 2: _____

Medical Information:

Name of Primary Insurance Carrier: _____

Policy Number: _____

Player's Physician: _____ Phone: _____

STEP 3

Read & Initial

Initial

Refunds & Deposits: A refund of the amount paid minus \$50 (to cover costs incurred by the program) will be issued if your child withdraws prior to the first game. A deposit of \$100 will be collected upon the issuance of program equipment. Refunds and deposits will be given upon the return of all equipment. No registration fee refunds will be issued after the first game.

Initial

Physical Exam: All players are required to have a current physical completed by a physician **using the designated MSHSAA form**. Physical exams can be no older than six months prior to the start of the season and must be turned in before players will be allowed on the field for practice or games.

Initial

Volunteering: Families are required to work at least once during the season. Contact organizers for work duty opportunities. A \$100 deposit (per family) will be collected and returned upon fulfillment of duty. Participants will be given the opportunity to buy out of work duty for \$100.

Waiver and Authorization for Treatment: I/We hereby give our consent for the above student to represent his/her team in athletics. I/We hereby agree to hold the school district of which this school is a part, it's employers, agents, representatives, coaches, and volunteers harmless from any and all liability, actions, causes of action, debts, claims, or demands of every kind and nature whatsoever which may arise by or in connection with participation by my child/ward in any activities related to Jr. Pirates Sports Association. If I/We cannot be reached and in the event of an emergency, we also give our consent for the Jr. Pirates representative to obtain through a physician or hospital of its choice, such medical care as is reasonably necessary for the welfare of the student, if he/she is injured in the course of any Jr. Pirates activities. I/We further state that we will report all previous injuries or additional conditions that are known to us which may affect this athlete's performance or treatment.

Initial _____

Player/Parent/Guardian Consent and Warnings: I/We give permission for my child/ward to participate in Jr. Pirates football. I/We realize that participation in football involves the potential injury which is inherent in all sports. I/We acknowledge that even with the best coaching, use of the most advanced protective equipment and strict observance of rules, injuries are still a possibility. On rare occasions these injuries can be so severe as to result in total disability, paralysis or even death.

I/We acknowledge that participation in the sport is an acceptance of some risk of injury. In order to minimize this risk, it is necessary that you as a participant be aware of and abides by certain safety rules and guidelines. The helmet you wear is not to be used to butt, ram, or spear an opposing player. This is in violation of MSHSAA football rules and such use can result in severe injury to your opponent. No helmet can prevent all head or neck injuries that a player might receive while participating in football. You must also report all injuries and any illness to the athletic trainer or coaches as soon as they become evident to you. In consideration of this opportunity to participate in Jr. Pirates football, Additional information is available at **www.MSHAA.org**. I hereby certify that I have read and understand the above statement, that I have had an opportunity to ask for explanation or clarification of any portion I did not understand, and that I agree to observe these and other rules and practices which may be employed to minimize my risk of injury.

Initial _____

Player/Parent Agreement: This application to represent Jr. Pirates Sports Association in athletics is entirely voluntary on my part and is made with the understanding that it is my/our responsibility to study, understand and abide by the Player & Parent Codes of Conduct. I/We also understand that if I/We do not meet the citizenship standards set by the team or if I/We am ejected from a contest because of an unsportsmanlike act, it could result in me/us not being allowed to participate in the next contest or suspension from the team either temporarily or permanently.

Initial _____

Disclaimer: The Jr. Pirates football program is independent of and not affiliated with nor sponsored by the Pattonville School District or the Pattonville Board of Education. The views, opinions and programs of the Jr. Pirates Sports Association therefore do not necessarily represent those of the Pattonville School District.

STEP 4

Sign

Player's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

STEP 5

Submit

Submit Registration Form and Payment: (payable to Pattonville School District) to:

Pattonville Community Education
Attention: Mary Reed
11097 St Charles Rock Road
St Ann, MO 63074
(314) 213-8094 phone
(314) 213-8695 fax
mreed@psdr3.org

Credit Card Type _____

Credit Card # _____ Exp Date _____

STEP 6: