

St. Raphael Flag Football Registration Form

Questions or Problems? Please call Mike Sekerak 440-930-0071 or e-mail mikeysek@oh.rr.com

To be registered, I MUST have the following or you will not be put on a team!!!!!!!

1. Completely fill out and sign this sheet.
2. The participant must have a physical, please have the doctor fill out page 1 of the CYO Sports Physical Form during the physical, you fill out page 2 and return both of them to me. Please get the physical done by July 15th, if this is not possible please contact me.
3. The fee of \$50 per participant (Checks made out to St.Raphael Athletic Commission.)
4. Please mail or drop off at least this form and the fee to me at 623 Arborside Lane, Avon Lake, OH 44012 by June 8, 2011! THERE WILL BE NO EXCEPTIONS TO THIS UNLESS YOU ARE NEW TO THE PARISH OVER THE SUMMER!!!!!!!!!!!!!!

If you are interested in being a head or asst. coach please contact me as soon as possible.

Player Name: _____

Address: _____ City/Zip _____

Telephone _____ Birth Date ____/____/____

Home Parish _____ School _____

Attending PSR Yes No Grade (In Fall) 3 4

Parents Names _____

Parents E-Mail Address _____

I, the undersigned, parent of _____ do hereby consent to permit my child to engage in the sport of flag football for the 2011 Season. Further, I, as parent and natural guardian of my minor child, and on his behalf, agree that neither the manager, the coach, the parish, the pastor, or the Bishop of Cleveland shall be in any way legally responsible for the cost of any treatment or hospitalization or any medical expenses arising out of any injury received by my child while engaged in practice sessions or scheduled games. I further agree to save hold harmless and indemnify, any manager, coach, parish, pastor, or Bishop of Cleveland from any and all claims for damages sustained by my child arising out of his participation in this sport. I further agree that my child will have an annual physical examination from a physician before the child participates in any athletic activity. Per CYO League rules, I understand that my child must attend a parochial school or be currently attending a PSR class. No refunds after Sept. 1.

Parent Signature: _____ Date: _____