

Ridgeland Recreation & Parks Flag Football Registration Form

Player's Name (First) _____ (Last) _____

Date of Birth _____ Player's Age: As of September 1st _____

Address _____

City _____ State _____ Zip _____

Mother's Name: _____ Father's Name: _____

Home Phone Number: _____

Mother's Work Phone: _____ Father's Work Phone: _____

In case of emergency-Name & Phone: _____

List any physical limitations: _____

Email Address: _____

Fee: \$70.00

Jersey Size: _____ Would you like to: Coach _____

Youth Small: _____ Assistant Coach _____

Youth Medium: _____

Youth Large: _____

Adult Small: _____

Adult Medium: _____

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 Flag Football team hereby represent that such is in good health and can participate in 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 Flag Football activities, including going to or coming from Flag Football practice, activities, or games. I/We hereby absolutely assume all risks and hazards incidental to such participation and release, absolve, and fully forgive and further agree to indemnify and hold harmless the City of Ridgeland and all persons and entities associated with the City of Ridgeland, including persons transporting my/our child to and from activities, 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.

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 _____

Cash _____ Check# _____

**PO Box 217 Ridgeland, MS 39158
Make checks payable to Ridgeland Recreation and Parks (RR&P)**