City Colts Football and Cheer 2025

Last		Middle	
also known as	1 iist	winddic	
Address			
City			
Zip	11		
Phone No:	Birth date MaleFemale		
AGEGender:M	laleFemale	- 21 5	
Sport: Football Cheer	Dance		
School:	Grade Level:		
Grade Point Average:	Alternative Form Participant:		
(Must meet Scholastic Fitness Req	uirement of 2.0/70% or else f	fill out the Scholastic Eligibility	
Form or Home School Eligibility F	Form).		
Mailing Address if different from a	ibove:		
7//	100 TH ASSE	1.6	
		10.79.77	
Name of Parent/Guardian		Relationship to	
Athlete:			
Address (if different from above)			
	The second second		
City		State	
Zip		WAY.	
Telephone No:	Emai		
Address:	(19.1)		
Emergency Contact Information	(if the parent/guardian car	nnot be reached):	
Name		- 1	
Relationship to Athlete			
Home Telephone No:		The second of the second	
Cell or work No.:			
City Colts Official Use Only:	****	1 D	
Registration Number:	Witnesse	ed By:	
Participant Fees Amount Paid \$			
	Check Cradit Cor	rd Other (places synlein)	
Type of Transaction:Cash _ Proof of Age verified? Yes No	CheckCledit Cal	iuOmei (piease expiain)	
Birth Certificate Other (please expl	(ain)		
1	•	10u / 11u / 12u / Chaar	
Division of Play (circle one): 6u Fl Weight at Time of Registration (Fo		10u / 11u / 12u / Clieet	
Proof of Scholastic Fitness verified	•	=314	
rioui di Scholastic Fithess verified	: TES ULINU		

2025 Waiver Form

PLEASE PRINT	
Player Name:	
	11
Coach/Team Name:	
Codelli Team Teame.	
consideration for my child being permitted to p 2025 AYF National Championship in Naples, It agree that neither myself nor anyone associated attach the property of City of Lawrence or prossussociated and their agents of City Colts Footbad damage for death, personal injury, or property of my child's participation in this sporting event. The Leroy Owens and/or any volunteers associated employees from and against all liability, including any way with minor child's participation in the sports involve physical contact between players such sporting events, and that participants in suppersonal injuries (including death) and/or properties of participation, nevertheless, I hereby agree release and hold harmless to Leroy Owens and/or properties.	with my child will make a claim against, sue ecute Leroy Owens and/or any volunteers all, sponsors, facilitators, and employees for damage which my child may sustain because of This release is intended to discharge in advance and their agents, sponsors, facilitators and ing negligent actions, arising out of or connected hese sporting events. [] I further understand that s, that serious accidents occasionally occur during ch sporting events occasionally sustain serious erty damage, consequently thereof. Knowing the ee that all players and I assume those risks and for any volunteers associated and their agents, agh negligence or carelessness) might otherwise
Guardian Signature:	Date: