

Warren County Midget Football League  
2020 Football Season

Player Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Age: \_\_\_\_\_  
Grade during 2020 football season: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Parents' Name: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
Email: \_\_\_\_\_

**Please check the team the player listed above played on last season (2019)**

- |  |  |
|--|--|
| <input type="checkbox"/> Belvidere Wildcats              | <input type="checkbox"/> Pohatcong Warriors            |
| <input type="checkbox"/> Bethlehem Catholic Jr. Hawks    | <input type="checkbox"/> Riegel Ridge Rams             |
| <input type="checkbox"/> Lambertville / New Hope Rambler | <input type="checkbox"/> Steele Hill Bulldogs          |
| <input type="checkbox"/> Lopatcong Panthers              | <input type="checkbox"/> Washington / Mansfield Outlaw |
| <input type="checkbox"/> North Warren Patriots           | <input type="checkbox"/> Washington Twp. Panthers      |
| <br><input type="checkbox"/> <b>NONE OF THE ABOVE</b>    |  |

I have the authority and grant permission for my child, the above listed player, to participate on the \_\_\_\_\_ Football team for the 2020 Season. I understand that a signed document dated within the 2020 calendar year indicating my child is medically cleared to participate in football is required.

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature