



Boys & Girls Club of Western Broome  
 Family Center  
 One Clubhouse Road  
 Endicott, New York 13760  
 Phone: (607) 754-0225

**2010 Flag Football**

Co-ed Ages 6 - 8 years old. Registration starts: June 1st 2010. The first practice will be held on August 17, 2010. First game will be held on Sunday, September 12, 2010. Games are held at Ty-Cobb field. Participants must provide their own mouthpiece.

**COST: \$20.00 plus membership (\$42.00)**

Permission Form

Child's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ e-mail \_\_\_\_\_

2010 Memb. Number: \_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

I hereby give permission for my son / daughter \_\_\_\_\_ to participate in the following sport: \_\_\_\_\_. I understand that there are risks involved in participating in this sport, and I accept those risks for my child. I will not hold the club, its staff, coaches, or volunteers responsible for any accident / injury / theft that may be incurred while participating in the event. My son / daughter is, to the best of my knowledge, physically fit to participate in this activity. I grant permission for the Boys & Girls staff, coaches, or volunteers to secure any emergency medical care necessary for the duration of the sports season.

Parent Name (please print) \_\_\_\_\_ Parents Signature \_\_\_\_\_ Date \_\_\_\_\_

VOLUNTEERS NEEDED TO: Coach \_\_\_\_\_ Assist \_\_\_\_\_ Officiate \_\_\_\_\_

VOLUNTEER NAME: \_\_\_\_\_ Phone: \_\_\_\_\_