



# Flag Football



Grades: Kindergarten to 2



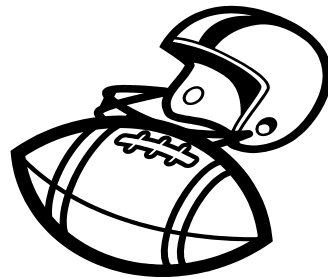
Sessions Every Monday  
6:00-7:30pm



\*Times are subject to change\*  
\*Tentative Start Date September 19\*  
\*No Equipment Needed\*

Children will get instruction on basic football skills such as:

\*Blocking



\*Formation

\*Handoffs

\*Stretching

\*Rules

\*Passing

Fee: \$60 per child

Family discount for three or more children

Registration deadline: August 26<sup>th</sup>, 2011

Late fee: \$5

No refunds/credit will be given after regular registration period has ended

Cancellations prior to deadline will be charged a \$5 processing fee

**\*All correspondence will be sent by e-mail. Please provide e-mail addresses on back\***

Mail form and fee to:

Boys & Girls Club of Wayne

153 Garside Ave

Wayne, NJ 07470

973-956-0033

[www.bgenwnj.org](http://www.bgenwnj.org)

[www.facebook.com/bgenwnj](http://www.facebook.com/bgenwnj)

\*Not a school sponsored event\*

Boys & Girls Club of Wayne  
Flag Football Program

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Grade as of Sept 2011 : \_\_\_\_\_  
HomePhone: \_\_\_\_\_ EmergencyPhone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Shirt Size (circle one) ys ym yl yxl as

Parent/Guardian Information:

Mother's Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Work E-Mail \_\_\_\_\_

Father's Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Work E-Mail \_\_\_\_\_

Does your child have any impairment? \_\_\_\_\_

**Sponsors:** Sponsorships are \$100 and tax deductible. Your company name will appear on all schedules & rosters and your team's t-shirts.

\_\_\_\_\_  
company or sponsor name

\_\_\_\_\_  
contact person & phone

**Coaches: We need coaches for your child's team!**

\_\_\_\_\_  
name

\_\_\_\_\_  
phone

I hereby give consent for my child to participate in the Boys & Girls Club of Wayne Flag Football Program. I assume all risk in regard to participation in this and any other Boys & Girls Club program in which my child may participate. I release, indemnify and agree to hold harmless the Wayne Boys & Girls Club, Inc. its directors, officers, coaches, and volunteers from any liability that may result from participation in Boys & Girls Club activities.

To promote our programs at the Boys & Girls Club, we would like to put photographs of our players on our website and other promotional material. Please check one of the following:

\_\_\_\_\_ Yes, I/We give my/our consent for my/our child's photograph to be used by the Boys and Girls Club of Wayne for promotional purposes.

\_\_\_\_\_ No, I/We do not give my/our consent to use my/our child's photograph to be used by the Boys & Girls of Wayne for promotional purposes.

By my signature, I attest to the following:

- That the above information is correct.
- That in the event of a medical emergency, I authorize the Boys & Girls Club of Wayne to seek emergency medical care for my child as deemed necessary by the Director.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date