

TOWN OF MOREAU REC DEPARTMENT

**South Glens Falls Flag Football Registration - FALL 2018**

Please fill out all information and enclose \$20.00 by August 10, 2018.

(Late Registrations will be Accepted) Financial Hardship Fee Assistance Available

Games will be Saturday Mornings in Sept/Oct/Nov.



Please Drop off or Mail to:

Town of Moreau  
351 Reynolds Rd  
Moreau, NY 12828



**INTERESTED IN BEING A VOLUNTEER COACH?**

LEGAL NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

DO YOU HAVE A CHILD PLAYING? Y OR N CHILD'S NAME: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade in the Fall? \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Rec League Experience? \_\_\_\_\_ Travel or Pop Warner Experience? \_\_\_\_\_ Height: \_\_\_\_\_ Weight \_\_\_\_\_

Does your child have any conditions that may limit his/her ability to participate? \_\_\_\_\_

If yes, please explain any modification that may allow for participation? \_\_\_\_\_

Describe any Pertinent Allergies/Medical Information: \_\_\_\_\_

Shirt Size:	Youth S	Youth M	Youth L	Youth XL
	Adult S	Adult M	Adult XL	Adult XXL

\*\*Shirts cannot be re-ordered due to incorrect sizing, please err on the bigger side.

\*\*I certify that I am the legal parent/guardian of the participant and give permission for the above named child to participate in the Youth Flag Football. I understand that participation in flag football may result in serious injury. I hereby agree to indemnify, save harmless, and waive liability of the Town of Moreau, The Town Board, the Employees, and volunteers thereof for any responsibility should any accident or injury occur to the undersigned participant as the result of participation in any program sponsored by the Moreau Recreation Department or while using Recreation Program Facilities.

Parent/Guardian 1: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian 2: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*Only one Parental signature required for registration. Please provide all contact information for effective communication during the season. Email [SGFFlagFootball@gmail.com](mailto:SGFFlagFootball@gmail.com) or [recreation@townofmoreau.org](mailto:recreation@townofmoreau.org) with any questions.