



LOS BANOS TIGERS YOUTH FOOTBALL 2019

www.losbanostigerfootball.com

Team Mom Use Only:

Paperwork Complete

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P.O.Box 967, Los Banos CA 93635

Circle One : Mighty Mite Pee Wee Junior Senior

PLAYER'S NAME(PRINT) _____ BIRTH DATE _____ AGE _____ WEIGHT _____ EMERGENCY # _____
on 11/30

ADDRESS _____ CITY _____ ZIP _____ PHONE # _____

MOTHER / GUARDIAN'S NAME _____ ADDRESS _____ PHONE # _____

FATHER / GUARDIAN'S NAME _____ ADDRESS _____ PHONE # _____

PARENT/GUARDIAN EMAIL _____ SCHOOL IN FALL _____ GRADE _____

PARENT'S PRIMARY INSURANCE _____ POLICY # _____ DR NAME AND PHONE _____

THE ABOVE PLAYER WHO IS PICTURED BELOW IS A MEMBER OF THE LOS BANOS TIGERS YOUTH FOOTBALL TEAM

To the best of my knowledge, all information on this **complete packet** is actual. I understand that the league may take action against any individual, team or association that willingly falsifies any submitted information of documents.

Head Coach

Initial _____

PLAYER'S PICTURE HERE

GENDER: (CIRCLE ONE)

MALE OR FEMALE

FOR MEDICAL EXAM
please see form attached

EMERGENCY MEDICAL AUTHORIZATION

I, As Parent /Guardian of said Player/Minor, do hereby authorize and direct the said association to act as agent for me to consent to and obtain medical, surgical, dental treatment and /or examination for said minor in case of illness or injury occurring from participation in any activities of the association and/or conference. I do hereby consent to x-ray, examination, anesthesia, medical or surgical, or dental treatment that is considered necessary by the attending physician or dentist. I understand that in an emergency, reasonable efforts will be made to notify me.

Father/Guardian _____ Date _____ Mother/Guardian _____ Date _____

For Office Use Only

Payment rec'd:	Payment rec'd:
Date:	Date:
Amount:	Amount:
CC auth#	CC auth#
Check #	Check#

Refund Policy

If a player quits BEFORE the first day of practice a full refund will be issued.
If a player is cut or quits AFTER the first day of practice a refund less \$25 will be issued.
For ALL refunds it is the parent/guardian responsibility to request refund.

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