

AGES 5-13

NFL FLAG FOOTBALL

Compete in the NFL Flag Football League! Participants receive game flags and a replica NFL jersey. Games are played on Saturday afternoons and some Monday & Tuesday evenings at the Shawnee Park Sports Complex.

WHEN

The league will tentatively starts September 21, 2019.

FEE

\$60.00 / Person for Early Registration Fee

SIGN UPS

The early registration deadline is August 16. A \$10.00 late fee will be applied between August 17-21.

SIGN UP ONLINE AT
www.cityofcape.org/football

**For more information, contact
Tony Weatherby at
tweatherby@cityofcape.org or
573.339.6626.**

Presenting
Sponsor:



410 Kiwanis Drive
Cape Girardeau MO 63701
573.339.6626
tweatherby@cityofcape.org



CITY of CAPE
GIRARDEAU
PARKS & RECREATION DEPARTMENT



NFL FLAG FOOTBALL REGISTRATION FORM

AGE: For ages 5-13 as of August 31.
START DATE: Tentative start date is September 21.
IMPORTANT DATES: Coaches' meeting and draft is scheduled for Thursday, August 22 at 6:00 p.m. at the Osage Centre.
REGISTRATION: The early registration deadline is August 16.
A \$10.00 late fee will be applied during the late registration period of August 17-21.
Register online at www.cityofcape.org/football or at the A. C. Brase Arena.
ENTRY FEE: \$60.00 per person (includes NFL replica jersey and flags).
LEAGUE DIRECTOR: Tony Weatherby. Contact at tweatherby@cityofcape.org or 573.339.6626.

PLAYER FORM

First Name _____ **Last Name** _____
Address _____ **City** _____ **State** _____ **Zip** _____
Primary Number _____ **Email** _____
Texting Number _____ **Cell Phone Provider (AT&T, Verizon, etc.)** _____
Date of Birth: ____/____/____ **Age** _____ **Gender (circle one):** **MALE** **FEMALE**
Child's school? _____ **Parent/Guardian Name** _____
Jersey (circle one): **YS (33" Chest)** **YM (34" Chest)** **YL (36" Chest)** **YXL (37" Chest)**
AM (40" Chest) **AL (42" Chest)** **AXL (44" Chest)** **AXXL (46" Chest)**
Division (circle one): **5-6 yr. olds** **7-8 yr. olds** **9-10 yr. olds** **11-13 yr. olds**
Special Requests: _____

I/We, the parent(s) of _____ fully understand the risk of personal injury due to my participating in the City of Cape Girardeau Parks and Recreation Department League, and hereby agree to assume such risk. In consideration of the opportunity to participate in this league I hereby waive all claims for personal injury and property damage, of any kind of character whatsoever, against the City of Cape Girardeau. In addition I hereby release the foregoing from liability for any such claims that may arise from, or occur as a result of, my participating in the City of Cape Girardeau Parks and Recreation Department League. In further consideration for the opportunity to participate in the City of Cape Girardeau Parks and Recreation Department League, I hereby agree to indemnify and hold harmless the City of Cape Girardeau, and all league officials, and coaches, including but not limited to relatives of participants in the City of Cape Girardeau Parks and Recreation Department League, for personal injury that may result from or be caused by intentional, deliberate, reckless, or negligent conduct. This indemnity shall survive my child/dependents participation in this City of Cape Girardeau Parks and Recreation Department League. I certify that my child/dependent is in good physical health and I have no knowledge of my child/dependent having a history of any type of physical or mental ailment that would present a risk of physical danger to my child/dependent or any participant in the City of Cape Girardeau Parks and Recreation Department League. I/we will furnish a certified Birth Certificate of the above named player upon request of the league officials.
I/We have read the above carefully, understand it, and agree to it.

Parents or Guardian signature

Date

COACH FORM

Only fill out if interested in coaching. A mandatory background check will be completed for every potential coach.

Coach's Name _____ **Player's Name** _____ **Age** _____
Address _____ **City** _____ **State** _____ **Zip** _____
Primary Number _____ **Email** _____
Texting Number _____ **Cell Phone Provider (AT&T, Verizon, etc.)** _____
Circle One: **Head Coach** **Assistant Coach** **Either** **Shirt Size (circle one):** **AS** **AM** **AL** **AXL** **2XL** **3XL**

HEAD COACHES ONLY:

Do you have an assistant coach (only 1 asst.)? **Yes** **No** **If yes, assistant coach's name:** _____

ASSISTANT COACHES ONLY:

Do you have a head coach you would like to join? **Yes** **No** **If yes, head coach's name:** _____

Coach's signature

Date