

# Tri-State Christian Football League

## King's Crusaders

Registration and Parental Consent Form  
Please Print Clearly

Player Name \_\_\_\_\_

Birth Date \_\_\_\_\_ Fall 2019 Grade Level \_\_\_\_\_

Address \_\_\_\_\_

City, State and Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent Cell \_\_\_\_\_

Player Cell \_\_\_\_\_

Years experience playing tackle football \_\_\_\_\_

Medical Conditions *(Please list any past or current conditions which may affect your child while playing football)*

\_\_\_\_\_  
\_\_\_\_\_

Emergency contact (relationship) \_\_\_\_\_

Phone number \_\_\_\_\_

Insurance Company Name \_\_\_\_\_

Group/Policy Number \_\_\_\_\_

\_\_\_\_\_ Initial here to give us permission to use your players picture on materials or website.

My child has permission to participate in the activities of the **Tri-State Christian Football League**. I (we) agree to take full responsibility for my child's well being and agree not to hold any individual involved with the **Tri-State Christian Football League**, including but not limited to directors, officers, staff, coaches, organizers, participants, volunteers and persons transporting players, liable for any harm resulting in participation of any league sanctioned activity.

Father's Signature \_\_\_\_\_

Father's Name \_\_\_\_\_ Date \_\_\_\_\_

Mother's Signature \_\_\_\_\_

Mother's Name \_\_\_\_\_ Date \_\_\_\_\_

If Player is 18 or over please sign here:

Player Signature \_\_\_\_\_ Date \_\_\_\_\_