

Registration Time: \_\_\_\_\_

League Use Only	
Cash	Amt.\$
Check #	Amt.\$

## FOREST HILLS YOUTH FOOTBALL 2004 Player Registration

Child's Name: _____	Age (as of 8/1/04): _____
Team: _____	Date of Birth: _____
Street Address: _____	City, State, Zip: _____
School: _____	School District: _____
Physical Disabilities: _____	Gender & Weight: _____
Father's Name: _____	Guardian's Name: _____
Mother's Name: _____	
Home Phone: _____	Work Phone: _____
Cell Phone: _____	E-mail Address: _____
Medical Insurance Co.: _____	Policy Number: _____

### RELEASE OF LIABILITY

In consideration of the services and opportunity rendered to my/our child, in connection with the football program of the FOREST HILLS YOUTH FOOTBALL ASSOCIATION, INC. I/we do hereby for myself/ourselves, my/our heirs, executors, administrators and guardians, consent to his/her participation in this program and RELEASE, WAIVE AND FOREVER DISCHARGE any and all claim which I/we may have or hereafter accrue to me/us against FOREST HILLS YOUTH FOOTBALL ASSOCIATION, INC., it's owners, officers, agents, representatives, and coaches, for any and all damages from any cause connected with his/her association and participation in FOREST HILLS YOUTH FOOTBALL ASSOCIATION, INC. football and cheerleading programs, including, but not limited to, practices, games, and exhibitions, as well as traveling to and from said events.

Father: _____	Mother: _____
(Signature/Date)	(Signature/Date)
Guardian: _____	
(Signature/Date)	

**Note:** At least one signature is required.

### PARENT AGREEMENT

I do hereby grant my consent for the above named child to participate in the FOREST HILLS YOUTH FOOTBALL PROGRAM and agree to accept the responsibility for the maintenance and return of the equipment and uniform that is issued to him/her. The charge for equipment/uniforms that are not returned is \$135.00 per child! I further agree that this child will not participate in any other association or school football program.

\_\_\_ Yes, you have my permission to publish my phone number(s) in the FOREST HILLS YOUTH FOOTBALL directory or team manuals.

\_\_\_ No, I do not want my phone number(s) published.

Parent /Guardian: \_\_\_\_\_  
(Signature/Date)

**Registration fees: \$50 (oldest child), \$25 (2nd oldest child), \$15 (3<sup>rd</sup> oldest child)**

**Checks payable to FOREST HILLS YOUTH FOOTBALL  
ALL REGISTRATION FEES ARE NON-REFUNDABLE!**

Registration Form, Medical Release Form, and fee can be mailed to:

**Angie Stocker**  
1456 Rambling Hills Dr, Cinti, OH 45230  
231-6464, foresthillsfootball@yahoo.com

**Michelle Brown**  
2136 Helston Court, Cinti, OH 45244  
474-6421, fhyc@cinci.rr.com