



# Brooklyn Extreme Flag Football Registration Form

## Player Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Pants Size: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

## Parent / Guardian Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

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

## Emergency Contact Information ( In event Parent(s) / Guardian(s) Cannot Be Reached )

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Parent / Legal Guardian Signature \_\_\_\_\_