



2010 Towson Spartans Football Registration Form

Or register online at www.leaguelineup.com/towsonfootball

PLAYER INFORMATION

NAME: _____

STREET: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ BIRTHDATE: _____ WEIGHT: _____

Player's regular t-shirt size:

- Youth Small (6-8)
- Youth Medium (8-10)
- Youth Large (12-14)
- Youth Extra Large (16-18)
- Adult Small
- Adult Medium
- Adult Large

Player's regular pant size:

- Youth Small (6-8)
- Youth Medium (8-10)
- Youth Large (12-14)
- Youth Extra Large (16-18)
- Adult Small
- Adult Medium
- Adult Large

Football experience:

Played last year for Towson

Played last year for another program

First year player

2009 Coach: _____

Indicate 2009 Pogram _____

Team information:

Players should play on the youngest team their weight qualifies them for. Coaches will determine final teams in August.

5-7 Clinic (max. 78 lbs)

Older But Lighter (OBL)

5-7 Clinic

6-8 (max. 90 lbs)

For players who are 1 year older than their division but **20lbs+ under the max weight** (i.e., a 10 y/o who weighs 80 lbs. playing 7-9 as an OBL). Max. 6 per team.

The philosophy of this age group is to be instructional and fun for the children. There are no playoffs. No scores will be kept during the game. A game will consist of 48 plays from scrimmage.

7-9 (max. 103 lbs)

8-10 (max. 113 lbs)

9-11 (max. 125 lbs)

10-12 (max. 140 lbs)

11-13 (max. 160 lbs)

Tackle to Tackle (TT)

Only for players in the 11-13 age bracket who are **5 lbs. over the weight limit**. Limits them to play tackle-to-tackle offensively or down linemen positions defensively.

Age determination date for 2010: July 31, 2010*
Max. weight is in uniform but does not include shoulder pads or helmets. *Rule change for 2010 was revoked.

COMMUNICATION

Primary team communication is via email. Please provide **at least one email address and phone** for parent/guardian. Provide additional addresses if you wish to receive communications at multiple accounts.

PARENT #1: _____

PARENT #2: _____

EMAIL: _____

EMAIL: _____

PHONE: _____

PHONE: _____

ALTERNATE EMAIL: _____

ALTERNATE EMAIL: _____

ALTERNATE PHONE: _____

ALTERNATE PHONE: _____

I would like to help: Coach Team Mom As needed

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MEDICAL/EMERGENCY CONTACT INFORMATION

CONTACT: _____ PHONE: _____ RELATIONSHIP: _____

REGISTRATION AND OTHER FEES

2010 Game Uniform fee: \$40*

Will be collected separately when jerseys are distributed in August *Players keep the game jersey.

I am a returning player and **will not** need a new jersey. My number was: _____

I am a returning player and **would** like a new jersey** NEW SIZE: _____ NUMBER _____

2010 Registration fees: \$125

Return your registration form along with the \$125 registration fee made payable to Towson Rec Council, 250 Dumbarton Rd, Balt. 21212.

See reverse side for required signatures and waiver.

ACKNOWLEDGEMENT, WAIVER AND RELEASE OF LIABILITY

I HEREBY CONFIRM PARTICIPANT IS IN GOOD HEALTH AND ABLE TO PARTICIPATE IN THE ACTIVITY, I ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISKS AND DANGER OF BODILY INJURY OR DEATH. I FULLY ACCEPT AND ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISK AND I HEREBY ASSUME THE RISK AND RESPONSIBILITY FOR ALL DANGERS AND RISKS ASSOCIATED WITH PARTICIPATION IN THE ACITIVITY. I acknowledge Baltimore County, Maryland, the recreation council, and their respective employees, directors, officers, volunteers, members and any other participant, entity, party or person involved in any regard with the activity or the activity premises, and their respective agents, personal representatives, heirs, employees, contractors, successors and assigns (each an "Activity Representative" and collectively the "Activity Representatives"), SHALL NOT BE RESPONSIBLE OR LIABLE IN ANY REGARD OR MANNER FOR ANY AND ALL PROPERTY DAMAGE OR BODILLY INJURY (INCLUDING SERIOUS PHYSICAL INJURY OR EVEN DEATH) INCURRED BY PARTICIPANT OR ANY PARTY RELATED THERETO AS A RESULT OF HIS/HER PARTICIPATION IN THE ACTIVITY.

I have read, fully understand and hereby freely sign, approve of, and agree to the terms of the registration form. I HEREBY UNCONDITIONALLY RELEASE, DISCHARGE, COVENANT NOT TO SUE, WAIVE MY RIGHTS AND REMEDIES, AND AGREE TO HOLD HARMLESS THE ACTIVITY REPRESENTATIVE from any and all claims costs, demands, losses, damages, or expenses associated with, in whole or in part, participants involvement with the activity. I certify all answers and information provided on the registration form are to the best of my knowledge true and correct throughout the activity. I shall inform the recreation council, in writing, if any of the information provided in the registration form is incorrect or changes during the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport, or United States Visa to the activity representative for review, if requested, at the time I submit this registration form to the recreation council.

I AGREE to the Acknowledgement, Waiver and Release of Liability Statement.

PARTICIPANT'S NAME

PARENT/GUARDIAN SIGNATURE

DATE

PRINTED NAME

RELATIONSHIP TO PARTICIPANT
