



MCYFO

Madeira Community Youth Football Organization

-2012 Flag Football Registration Form-

Player's Name: _____ DOB: _____

Parent or Guardian:: _____

Player's Address Include City and Zip _____

Parent Email(s) _____

Parent Home Phone _____ Parent Cell Phone (s) _____

Parent Street Address _____

2012 Grade: _____ 2012 School _____ Age as of 9/1/12 _____

Physician: _____ Phone: _____

Health Insurance Carrier: _____ Name on Policy _____

Policy Number: _____ Allergies (please be specific) _____

Any medications: _____

Signature of Parent / Guardian _____

Print Name _____ Date _____

_____ \$40.00 registration fee collected. This fee is fully refundable should your child decide not to participate prior to the beginning of practice for the fall 2012 season. Registration fee includes game jersey which is the property of the player.

Please make checks payable to MCYFO. Mailing address: PO Box 43547, Madeira, OH 45243

****Free T-Shirt with Registration Youth Size: _____***

Additional T-Shirts can be purchased for \$10.00 Youth Size: ___ Qty ___ Adult Size: ___ Qty ___

Board Members: Dean Bishop (deanbishop@hotmail.com 518-6871), John Cravaack (Cravaack@aol.com 235-7983)

Rick Rockwell (rockwell77@aol.com 543-9185), Bob Bell (bsucard84@yahoo.com 439-4182), Chris Flanagan (flanagan_c@hotmail.com 484-5379) , *Flag Football Operations:* Robert Manning robert.manning@us.dunnhumby.com 604-9680), Brian Bell (btbell@fuse.net 313-3780)

www.madeiracolts.com

Facebook Fan Page: <http://www.facebook.com/#!/pages/Madeira-Colts-Youth-Football-A-New-Beginning/164205217002480>