Philadelphia Little Quakers 4200 Macalester Street Philadelphia, PA 19124 www.philalittlequakers.com



## Philadelphia Little Quakers Football Registration Form

## **Player Information**

Name:		Birthdate:		
School:		Grade In Fall:		
Other family memb	ers in program:			
Parent Information				
Father's Name:		Mother's Name:		
Address:		Address:		
-				
Home Phone:		Home Phone:		
Work Phone:		Work Phone:		
Cell Phone:		Cell Phone:		
Email Address:		Email Address:		
•				
Emergency	In Case of Emergen	cy Information		
	-	Relation to contact	::	
Phone:	_			
Known Medical Conditions:				
		Phone for Doctor:		

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In consideration of \_

## MINOR WAIVER/RELEASE RELEASE OF LIABILITY FOR MINOR PARTICIPANTS READ BEFORE SIGNING

\_\_, my child/ward being allowed to participate in any way

(Name of child/ward on the PHILADELPHIA LITTLE QUAKERS team, related eve	participant) ents and activities, the undersigned acknowledges, appreciates, and agrees that:
	rolved in this program is significant, including the potential for permanent disability hal discipline may reduce this risk, the risk of serious injury does exist; and,
	WINGLY AND FREELY ASSUME ALL SUCH RISKS both known and unknown, LEASEES or others, and assume full responsibility for my participation; and,
significant concern in my child/ward's readiness for participat	customary terms and conditions for participation. If I observe any unusual tion and/or in the program itself, I will remove my child/ward from the nild/ward for the participation and bring such attention of the nearest
RELEASE AND HOLD HARMLESS THE PHILADELPHIA LI volunteers, other participants, sponsoring agencies, sponsor conduct the event ("Releasees"), WITH RESPECT TO ANY	If of my/our heirs, assigns, personal representatives and next of kin, HEREBY TTLE QUAKERS, LLC; its directors, officers, officials, agents, employees, is, advertisers, and if applicable, owners and lessors of premises used to AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property less programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE lead by law.
INDEMNIFY AND HOLD HARMLESSPHILADELPHIA LITTL	f of my/our heirs, assigns, personal representatives and next of kin, HEREBY LE QUAKERS and all above releasees from any and all liabilities incident to ams, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent
	PTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTANI NING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMEN
Parent/Guardian Signature:	Date Signed:
UNDERSTANDING OF RISK	
I understand the seriousness of the risks involved in participal and regulation, and accept them as a participant.	ating in this program, my personal responsibilties for adhering to the rules
Participant Signature:	Date Signed: