

2016 Jr. Tigers Flag Football Fundamentals Clinic

Alexandria Community Center 315 S. Harrison Street 724-7728

www.alexandriacommunitycenter.com

NEW AGE GROUPS THIS YEAR!

Players who are in grades K-1 will be introduced to the fundamentals of football by rotating through stations designed by AMHS varsity football coach, Pete Gast. All 3 sessions will be held at the Alexandria Intermediate School. Second graders with no experience will be allowed to participate in this clinic.

The \$30 fee includes a t-shirt. The registration form and fee must be returned to ACC on or before the deadline on Thursday, August 4 at 7:00 p.m. Register during regular business hours Tuesday-Thursday or on Thursday, August 4 from 5:00-7:00 p.m. A \$10 late registration fee will be added after this date. Ask about family discounts, payment plans, and financial assistance. All fees must be paid before the first session.

DON'T RETURN THIS FORM TO THE SCHOOL!

Flag football

Player's Name _____

Primary Phone # _____ Secondary Phone # _____

Address _____ City _____

Grade in Aug. 2016 _____ Age _____ Birthdate ____/____/____ Male _____ Female _____

Please order t-shirt large enough to fit over a jacket or sweatshirt.

Youth XS _____ S _____ M _____ L _____ XL _____

Adult S _____ M _____ L _____ XL _____

Does your child have any health problems that we should be aware of? _____

ACC is not responsible for accidents, injuries, or t-shirts that do not fit.

Fees must accompany this registration form unless other arrangements have been made with the director. No t-shirts will be issued until all fees have been paid in full. No refunds will be made.

In consideration of participation in the above program conducted by the Alexandria Community Center (ACC), I do hereby agree to hold free from any liability the ACC and its respective officers, employees, and volunteers. I do hereby for myself, my heirs, executors, and administrators waive, release, and forever discharge any and all rights and claims for damages which may hereafter accrue to me arising out of or connected with my child's participation in a program sponsored by ACC. I attest and verify that the participant listed above is physically fit and I have read this form and understand the expectations in the program signed up for. I understand that my insurance will be the primary insurance in case of accident or injury.

I give the Alexandria Community Center permission to use pictures of my child taken during sports activities.

Parent/Guardian(please print)

Signature

E-Mail Address _____

I am interested in helping and agree to a background check. _____

In addition to the \$40 registration fee, I would like to contribute \$ _____ to a scholarship fund that will allow all interested area children to participate in ACC programs.