

Pop Warner Little Scholars, Inc. 2019 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM



Special Note: This form must be dated after January 1, 2019 and is APPLICABLE ONLY FOR THE 2019 SEASON.

This form must be submitted to your LOCAL organization prior to the athlete participating in Pop Warner. No other forms are acceptable. Every Pop Warner Association must have a fully completed and signed original of this form prior to allowing the athlete to participate.

Legal Name of Participant (must match birth certificate): First Middle Also known as State Zip Gender: Male Female Birth date Phone No: Sport: Football Cheer Dance Mother's Month and Day of Birth Grade Level: School: Grade Point Average: Alternative Form Participant: (must meet Scholastic Fitness Requirement of 2.0/70% or else fill out the Scholastic Eligibility Form or Home School Eligibility Form). Mailing Address if different from above: Relationship to Athlete: Name of Parent/Guardian Address (if different from above) State Zip _____ Telephone No: Email Address: **Emergency Contact Information (if the parent/guardian can not be reached):** Home Telephone No: ______ Cell or work No.: **Pop Warner Official Use Only:** Registration Number: _____ Witnessed By:_____ Participant Fees Amount Paid \$ Type of Transaction: ____Cash ____Check ____Credit Card ____Other (please explain) Proof of Age verified? Yes No Birth Certificate Other (please explain) Division of Play (circle one): Flag / Tiny Mite / Mitey Mite / Jr. Pee Wee / Pee Wee / Jr. Varsity / Varsity / Unlimited Weight at Time of Registration (Football Only):

Proof of Scholastic Fitness verified? Yes

No