



MONONA GROVE YOUTH FOOTBALL

PO Box 31
Cottage Grove, WI 53527

www.mononagrovefootball.com

Program Director: Eric Oldenburg (608) 772-4717

Monona Grove Eagles
7th and 8th Grade
Youth Football

2017 Football Season Registration Form

Registration Fee is determined by postmarked date.

Registration Fees - Returning Player (PeeWee Player)		Registration Fees - New Player (check appropriate box)	
March 1-April 30	\$175	March 1 - April 30	\$200
May 1- May 31	\$200	May 1 - May 31	\$225

1. If Players wish to receive the official Eagle practice jersey with their last name printed on the back, please add \$15.
2. Players submitting Registration Forms on or after May 31, 2017 will be placed on a waiting list. New residents are excluded.
3. Make checks payable to MONONA GROVE YOUTH FOOTBALL OR MGYF. Mail to: MGYF PO Box 31 Cottage Grove, WI 53527.
4. Registration Form must be accompanied by check in the correct dollar amount for player status. NO EXCEPTIONS.

Player Information (please print legibly)

Last Name _____ First Name _____ DOB _____ Gender _____
 Street Address _____ Home Phone _____
 City _____ State _____ Zip _____
 Grade Fall 2017 _____ Jersey Size (S)____ (M)____ (L)____ (XL)____ (XXL)____ School Attending _____
 Returning Player (No) _____ (Yes) _____ Last Season Coach _____
 Number of years participating in MGYF (Pee Wee & Eagles) _____ Weight _____

Parent/Guardian Contact Information (please be complete as possible)

Parent / Guardian 1	Parent / Guardian 2
Full Name	Full Name
Relationship to Player	Relationship to Player
Work Phone	Work Phone
Cell Phone	Cell Phone
Email Address	Email Address

Medical Information

Physician / Family Doctor	
Doctor's Phone	
Insurance Carrier	
Hospital Preference/Phone	
Medical History (Allergies, Medications, Special Conditions, etc.)	

IMPORTANT NOTE: If the player is under medical care or is on prescribed medication, a note from his/her physician is required.

Parent/Guardian Permission

Equipment will be reserved when full registration payment is received and equipment will be issued during the first week of practice. Players will not be allowed to participate in the Monona Grove Youth Football program if payment is not paid in full. Football uniforms and equipment are the property of Monona Grove Youth Football and must be returned by the end of the season as directed. I agree to pay the cost of any lost equipment issued to my child or me by MGYF. **No refunds after helmet is issued.**

Medication Authorization and Grant of Consent: I hereby certify that my child is in good health and may participate in all activities. In case of an emergency, I give my permission for my child to be given emergency treatment at any responsible accessible hospital.

Liability Waiver: As the parent (or legal guardian) of the above named minor, I grant permission for the minor to participate in all activities of the sports program. I assume all risk and hazards incidental to such participation, including transportation to and from such activities, and do hereby release and waive all claims against Monona Grove Youth Football, Monona Grove School District, City of Monona, sponsors, volunteers, agents and other participants. I understand and acknowledge that MGYF does not carry accident insurance.

Signature of Parent / Guardian _____ Print Name _____ Date _____

MGYF Use	Check No.	Amount Paid	Date Received