



## *Jr. Wildkit Football*

### EVANSTON JR. WILDKIT PLAYER REGISTRATION FORM

Participants Name \_\_\_\_\_ DOB \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_

E-mail \_\_\_\_\_

School \_\_\_\_\_ Grade (fall of upcoming school year) \_\_\_\_\_

Medical Background (allergies, etc.) \_\_\_\_\_ Weight \_\_\_\_\_

Heritage (optional)  
\_\_\_\_\_ African American \_\_\_\_\_ Asian \_\_\_\_\_ Caucasian  
\_\_\_\_\_ Hispanic \_\_\_\_\_ Other: \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_

**Registration Fee:**

Early Registration: \$230.00 \_\_\_\_\_ Regular Registration: \$250.00 \_\_\_\_\_ Scholarship: \$ \_\_\_\_\_

\_\_\_\_\_ Yes I would like to help with the Fee assistance of another Child. Amount \$ \_\_\_\_\_

Paid in Full \_\_\_\_\_ Partial Payment \_\_\_\_\_ Balance Due \_\_\_\_\_

**Jr. Wildkit Football will not issue refunds, for any reason, after the fourth day of practice.**

I hereby assume all risks and dangers and will hold harmless Evanston Jr. Wildkits, The City of Evanston, Weissbourd-Holmes Family Focus Center, Evanston School District #65, Evanston Township High School #202 and their respective offices, agencies, and employees from all actions, causes of actions, suits, and any claims, demands and liabilities whatsoever, both in law and equity, in connection with participating activity.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_