HILLSDALE RECREATION



3RD GRADE - 6TH GRADE

Registration Fee: \$100

PHYSICAL FORMS MUST BE TURNED IN BY FIRST PRACTICE

Registration Deadline August 21, 2023
PAYMENT MUST BE MADE AT THE TIME OF REGISTRATION

CONDITIONING WEEK AUGUST 28 - 31

GAMES PLAYED SATURDAYS STARTING SEPTEMBER 16
SCHEDULES TBA

| Player's Name: | Grade in Fall 2023: | | | | | | | | |
|---|-----------------------------------|--------------------------------|-------------------------------|---------------------------------------|--------------------------|------------------------|---------------------------|--|--|
| Address: | | | | | | | | | |
| Jersey Size (Adult Sizes Available) 6/8_ | 10/12 | 14/16 | 18/20 | AS | AM | AL | AXL_ | OTHER | |
| Pant Size (Adult Sizes Available) 6/8 | _ 10/12 | 14/16 | _ 18/20 | _ AS | _AM | _ AL | _ AXL | _ OTHER | |
| E-mail Address: | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| Parent(s): | | | | | | | | | |
| Home #: | Cell #: | | | Work #: | | | | | |
| Emergency Contact: | Phone #: | | | | | | | | |
| Insurance Company: | Policy Number: | | | | | | | | |
| WAIVER:I, the undersigned, hereby agree to rele actions whatsoever in any matter arising from my proof of my child's age. I clearly understand that do so. Photographs may be taken at certain Recr reproduced for publication. | v child's parti if I cannot pr | cipation in t ovide proof c | his program. of my child's | I also una age in a ti | lerstand th mely mann | at at any er, he or | time I may she will be | be asked and must provid suspended from play until | |
| Parent's Signature: | .'s Signature: | | | | Date: | | | | |
| Are you willing to be a v To be considered you must complete Recreation Department for details. | | | | | | ground | Check. | Contact the | |

Return this form with Physical and Concussion Acknowledgement forms to:

Hillsdale Recreation Department - 97 N. Broad St., Hillsdale, MI 49242 - (517) 437-6457 Website: cityofhillsdale.org - Find us on Facebook at Hillsdale Recreation