

Warren County Midget Football League
2020 Football Season

Player Name: _____
Date of Birth: ____ / ____ / _____ Age: _____
Grade during 2020 football season: _____
Home Address: _____
City/State/Zip: _____
Parents' Name: _____
Contact Number: _____
Email: _____

Please check the team the player listed above played on last season (2019)

- | | |
|--|--|
| <input type="checkbox"/> Belvidere Wildcats | <input type="checkbox"/> Pohatcong Warriors |
| <input type="checkbox"/> Bethlehem Catholic Jr. Hawks | <input type="checkbox"/> Riegel Ridge Rams |
| <input type="checkbox"/> Lambertville / New Hope Rambler | <input type="checkbox"/> Steele Hill Bulldogs |
| <input type="checkbox"/> Lopatcong Panthers | <input type="checkbox"/> Washington / Mansfield Outlaw |
| <input type="checkbox"/> North Warren Patriots | <input type="checkbox"/> Washington Twp. Panthers |
|
<input type="checkbox"/> NONE OF THE ABOVE | |

I have the authority and grant permission for my child, the above listed player, to participate on the _____ Football team for the 2020 Season. I understand that a signed document dated within the 2020 calendar year indicating my child is medically cleared to participate in football is required.

Parent/Guardian Name

Parent/Guardian Signature