

HARRISBURG/JUNCTION CITY YOUTH FOOTBALL
PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM



***Special Note: This form must be dated after January 1, 2018 and is applicable only for the 2018 season.**

This form must be submitted to Harrisburg/Junction City Youth Football prior to the athlete participating in the 2018 football season. No other forms are acceptable. Every Willamette Valley Youth Football association must have a fully completed and signed original copy of this form on file prior to allowing the athlete to participate.

Legal Name of Participant:

Last: _____ First: _____ Middle: _____

Birth Date: _____ Male: _____ Female: _____

Address: _____

City: _____ State: _____ Zip: _____

Medical Conditions: _____

School attending fall 2018: _____ School attended 2017: _____

Grade level fall 2018: _____

Name of Parents/Guardians

Name: _____ Primary Phone: _____

Email: _____ Relationship: _____

Name: _____ Primary Phone: _____

Email: _____ Relationship: _____

Legal Guardian: _____

Address (if different than above): _____

City: _____ State: _____ Zip: _____

Emergency Contact Information (if parent/guardian cannot be reached):

Name: _____ Primary Phone: _____

Relationship to Athlete: _____ Secondary Phone: _____

Harrisburg/Junction City Official Use Only:

Participant Division: TM MM JPW PW JM JO SO

Amount Paid: \$ _____ Scholarship Amount: \$ _____ Opt out of Fundraiser: \$ _____

Type of Payment: Cash _____ Check: # _____ Paid By: _____