



Indoor Flag Football Registration Form

Teams Now Forming!!

Open to boys and girl's pre-k thru 5th grade

Starting in January 2018

\$45 for 1st child

\$35 for second child in same household

2850 Weir Avenue,
Weirton, WV 26062
Office: (304) 914-3248
Fax: (304) 914-3734

Indoor Family Sports & Entertainment Complex

Players Name: _____

Parents Name: _____

Players Address: _____

Phone: _____ Email: _____

Age as of November 1st, 2017 _____ Birthday: _____

Have you played before? Y N Where? : _____

I, _____ (parent or guardian), would like to help
____ Coach ____ Asst Coach ____ Team Parent _____ Other

Requests: Coach: _____ Team Mate: _____

T-Shirt Size: (Circle One): C Sm, C Med, C Lg, Ch XL
A Sm, A Med, A Lg, A XL, A XXL

I, the parent/guardian of the registrant give my consent for the registrant to participant in **KRAZY BOUT SPORTZ INDOOR FLAG FOOTBALL**. I hereby release, discharge and or otherwise indemnify **KRAZY BOUT SPORTZ, their employees and agents, KBS volunteers, Coaches, Co-Coaches, and other support team parents both on and off the field, against any claim or on behalf of the registrant. I take full responsibility for any injuries incurred or resultant death.** In case of an emergency, call our home. If I cannot be reached, I give my consent for emergency medical care prescribed by a licensed doctor of Medicine or doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of the registrant. I understand that insurance will not be furnished by **KRAZY BOUT SPORTZ**.

Signature: _____ Date: _____

Please mail or drop this form off to **Krazy Bout Sportz**.