



Lafayette High School Football Player Registration

<input type="checkbox"/>	Insurance paid	\$ _____
<input type="checkbox"/>	Donation	\$ _____
<input type="checkbox"/>	Sponsorship	\$ _____

Player Information

Last Name: _____ First Name: _____

Grade: _____ Birth Date: _____ / _____ / _____ Age: _____

Home Address: _____ Apt/Unit Number: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Height: _____ - _____ Weight: _____

Email: _____

Parent/Guardian Information

Name: _____ Relationship: _____

Phone: (____) _____ - _____ Email: _____

Does Player reside with you? Yes No

Do you want to receive text message reminders/updates? Yes No

If yes, list number to receive messages: (____) _____ - _____

Name: _____ Relationship: _____

Phone: (____) _____ - _____ Email: _____

Does Player reside with you? Yes No

Do you want to receive text message reminders/updates? Yes No

If yes, list number to receive messages: (____) _____ - _____

Emergency Contact Information

Parent/Guardian Name: _____ Relationship: _____

Phone: (____) _____ - _____ Email: _____