



**BOYS & GIRLS CLUBS  
OF SNOHOMISH COUNTY  
EDMONDS UNIT**



EDMONDS BOYS  
AND GIRLS CLUB

## FLAG FOOTBALL

### NFL COED YOUTH FOOTBALL

- The Edmonds Boys and Girls Club is offering co-ed flag football for ages 5-14.
- Teams will practice 2 nights a week with games on Saturday.
- Practices will begin the week of March 18<sup>th</sup>.
- All practices will be held in Edmonds or Mukilteo.
- Games will be played near the Snohomish Boys and Girls Club.
- The registration fee is \$115.00 which includes an NFL team replica jersey.
- Signups February 7<sup>th</sup> - March 8<sup>th</sup>.
- Please complete the Flag Football registration form.

## BASEBALL COED T-BALL, COACH PITCH, & PITCHING MACHINE

- Sign-ups February 18<sup>th</sup> –March 22<sup>nd</sup>
- T-Ball – Ages 4-5
- Coach Pitch – Ages 6-7
- Pitching Machine – Ages 7-9
- Majority of the games will be played on Saturdays.
- The registration fee is \$80.00 for T-ball,
- The registration fee is \$90.00 for coach pitch/pitching machine.
- Please complete the Baseball registration form.

*Interested in coaching? Volunteer coaches and team sponsorships are needed.*

If you haven't played at the Edmonds Boys and Girls Club before, please complete and mail in a membership registration form or stop by the club.

For more information please contact Brandie at: 425-774-0630 or by email at [blovelace@bgcsc.org](mailto:blovelace@bgcsc.org)

The Edmonds School District does not sponsor or endorse the activity and/or information contained in this material.



## Edmonds Boys and Girls Club

### 2013 Spring Flag Football and Baseball Registration

#### Flag Football ages 5-14 & Baseball ages 4-9

Football Fee \$115.00

T-Ball Fee \$80

Coach/Machine Pitch Fee \$90.00

Please complete the registration form and drop off or mail with payment to: Edmonds Boys and Girls Club 310 6<sup>th</sup> Ave. N. Edmonds, WA. 98020, Monday – Friday 6:30AM-6:30PM.

- Football registration ends promptly March 8<sup>th</sup>, 2013.
- Baseball registration ends promptly March 22<sup>nd</sup>, 2013.

#### Participant Information

Please circle the sport you are registering for: **Flag Football**      **Baseball**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: M F      Date of Birth: \_\_\_\_\_ Players age (as of April 1<sup>st</sup>, 2013): \_\_\_\_\_

Email: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Parents Name: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Coach Request: \_\_\_\_\_ Jersey Size: YS YM YL AS AM AL AXL (sizes run ½ size small)

Yes, I am interested in being part of my child's team by: COACHING \_\_\_ SPONSORING \_\_\_

*For more information please contact Brandie at: 425-774-0630 or by email at [blovelace@bgcsc.org](mailto:blovelace@bgcsc.org)*

#### Disclaimer

I declare that I am the parent or legal guardian of \_\_\_\_\_ a minor, age \_\_\_\_\_. I have full custody and control of the child. To the best of my knowledge my child is in good health and is adequately immunized to participate in Club activities. In the event that my child is injured or should require medical attention, I hereby request you to contact our family physician. In the event that the Doctor cannot be reached I hereby authorize his/her athletic supervisor, coach, or any other Club volunteer or employee to secure necessary medical treatment for my child. I further acknowledge that I will be responsible for my medical or hospital fees or costs associated with my child's treatment. If possible, confirmation of this authorization should be made with me prior to treatment by calling me at the above listed phone numbers. In case I cannot be reached in an emergency, medical treatment as described above may proceed without further authorization. I understand the "open door" policy which allows children to come and go as they please. I understand also that the club accepts no responsibility for keeping my child in the building or on the premises except when enrolled in a licensed childcare program. I hereby give permission for a photo of likeness of my child to be used in brochures and other promotional materials produced by the Boys and Girls Clubs of Snohomish County. The photo will not be sold without the express written consent of the parent or legal guardian. I agree that this is valid as long as my child is a member of the Boys and Girls Club of Snohomish County.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*"The Edmonds School District does not sponsor or endorse the activity and/or information contained in this material".*