



# 2010 FLAG FOOTBALL LEAGUE



Carroll Parks and Recreation Department is offering a flag football league for boys and girls in 3<sup>rd</sup>-4<sup>th</sup> and 5<sup>th</sup>-6<sup>th</sup> grades.

**LEAGUES:** 3<sup>rd</sup> – 4<sup>th</sup> grades and 5<sup>th</sup> – 6<sup>th</sup> grades

**PRACTICES:** After all team rosters are established, players will get a call from their coach sometime towards the end of August. All practice times and locations are set-up by each coach.

**GAMES:** Games will be played at the Carroll Softball Complex on Monday, Tuesday or Thursday evenings (6:00pm, 7:00pm). The first game will begin late August and will approximately end mid to late October.

**EQUIPMENT:** Team t-shirts and mouth guards will be issued at practice and is included in the registration fee. Mouth guards are required and can be purchased at the concession stand for \$1.00 if they lose or misplace the initial mouth guard. Football cleats are optional.

**FEE:** \$20.00 per participant (Includes T-Shirt and Mouth Guard)

Drop off registration form at the Carroll Recreational Center office or mail to: Carroll Rec Center, 716 North Grant Road, Carroll, IA 51401

YOUTH FLAG FOOTBALL TEAMS ARE STILL AVAILABLE TO SPONSOR FOR MORE INFORMATION CALL MIKE AT 792-5400

## REGISTRATION DEADLINE JULY 30, 2010

**\$10 LATE FEE WILL BE CHARGED AFTER THE 30<sup>th</sup>.**

**FEE: \$20.00**

### FLAG FOOTBALL LEAGUE

Fee Payable To: CARROLL REC CENTER - \$20.00  
Mail To: CARROLL REC CENTER, 716 N GRANT ROAD, CARROLL, 51401

**Registration must be filled out by July 30, 2010**

Boy \_\_\_\_\_ Girl \_\_\_\_\_

Grade (Fall 2010): \_\_\_\_\_ 3<sup>rd</sup> & 4<sup>th</sup> \_\_\_\_\_ 5<sup>th</sup> & 6<sup>th</sup> School \_\_\_\_\_

Participant's Names: \_\_\_\_\_

Birthday: \_\_\_\_\_

Parent's Names \_\_\_\_\_

Home Phone: \_\_\_\_\_ Daytime/Cell: \_\_\_\_\_

Address/City/Zip code: \_\_\_\_\_

Email \_\_\_\_\_

Please List Any Medical Conditions \_\_\_\_\_

Circle **YOUTH** T-Shirt Size: YS YM YL

**ADULT** T-Shirt Size: S - M - L - XL - XXL

#### WAIVER FOR PARTICIPANT BY PARENT/GUARDIAN:

I agree to assume full responsibility for any risk implicit or direct by participating in any activity or facility. The City of Carroll does not provide individual, team, or group accident insurance for participants in parks and recreation activities. The individual mentioned above has my permission to participate. I also give permission for any photos of participants taken during the program to be used for future Department promotional materials.

Signed \_\_\_\_\_ Date \_\_\_\_\_

### VOLUNTEER

(1-2 hours per week for 5 weeks)

\_\_\_\_\_ COACH

\_\_\_\_\_ ASST. COACH

\_\_\_\_\_ OFFICIAL

NAME: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

DAYTIME/CELL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

SHIRT SIZE (ADULT):

S M L XL XXL