## **Napoleon Flag Football**

Grades 2nd thru 4th

Participant's Name:

Parent's Name(s):

**Phone Number:** 

T-Shirt Size (Youth)

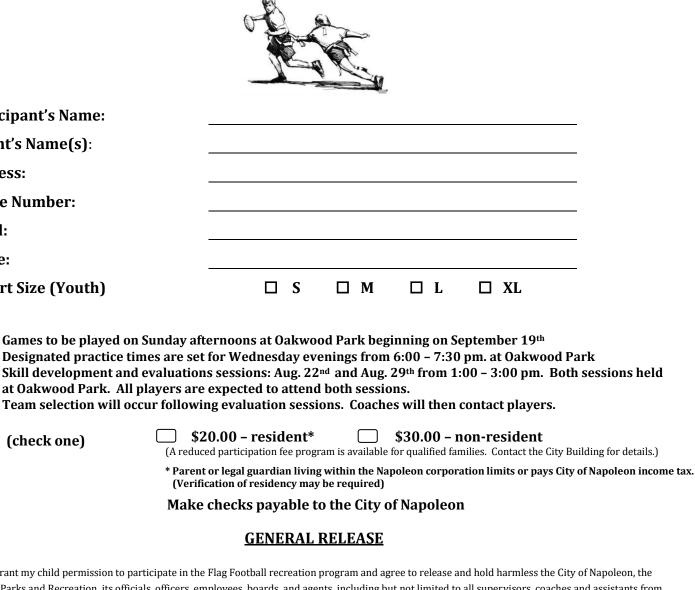
Fee: (check one)

Parent or Legal Guardian's Signature

Address:

Email:

Grade:



Date

I hereby grant my child permission to participate in the Flag Football recreation program and agree to release and hold harmless the City of Napoleon, the Napoleon Parks and Recreation, its officials, officers, employees, boards, and agents, including but not limited to all supervisors, coaches and assistants from any and all liability for damages resulting from injury to said child while engaged in the program. I also agree to release and hold harmless all public facility owners and their officials, officers, employees, and agents while engaged in this program.

**Emergency Phone Number YES**, I would be a volunteer coach for this program. Please contact me. **YES,** I would be willing to assist the coach of my son/daughter's team.

Return to: Napoleon City Building, Parks and Recreation Dept., 255 W. Riverview Ave., Napoleon, OH. 43545. Entry Deadline - Thursday, August 20th. Any questions email napoleonflagfootball@gmail.com or call the City Building at 592-4010