2019 MIDDLE SCHOOL

TACKLE FOOTBALL

PLAYER FORMS CHECKLIST

BOYS & GIRLS CLUB OF ALACHUA COUNTY

TO PLAY TACKLE FOOTBALL ALL FORMS MUST BE COMPLETE, ACCURATE, AND VERIFIED!

Player's First Name:_____ Player's Last Name:_____

Parent/Guardian Name: _____ Email: _____

Home Address: _____ City: _____ ST: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

FORMS REQUIRED TO BEGIN PLAY

- ❑ 2019 BGC Middle School Tackle Football Player Forms Checklist *(THIS FORM)*
- ❑ 2019-2020 BGC Application For Membership Form
- ❑ 2019 BGC Middle School Tackle Football Registration Form
- ❑ Payment Receipt
- ❑ Proof of Date of Birth ……. ❑Birth Certificate OR ❑Passport
- ❑ 2019 BGC Form EL2
- ❑ 2019 BGC Form EL3
- ❑ Preseason Academic Report (Ending Grade Report From Previous Academic Year)

BY SIGNING BELOW:

I attest that I am the parent/legal guardian of the player named above. I represent that I am at least eighteen (18) years of age and am fully competent to sign this document. I acknowledge that all of the above required documents have been completed fully and that all of the information contained therein is accurate to the best of my knowledge. I acknowledge that my child will be withheld from playing tackle football at the Boys & Girls Club of Alachua County until all documents are completed and verified by a BGCA Representative.

_____ _____ ____/____/_____

Parent/Legal Guardian Name (PRINT) **Parent/ Legal Guardian Signature** **Date**

_____ ____/____/_____

Athletic Director Signature **Date**

FOR OFFICE USE ONLY

Membership #: _____ Paperwork Complete: ❑Yes ❑No Missing/Incomplete Item #:_____

STAFF INITIALS