

# HACKENSACK JR FOOTBALL

Registration Sign Up:  
Hackensack Recreation Department  
Holt Street  
Mon-Fri 9-5

Practice begins: Aug. 1st  
Foshini Park - Mon-Thurs 6pm-8pm

Participant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ Age \_\_\_\_ (Age based on calendar year) Grade \_\_\_\_\_ Weight \_\_\_\_\_  
Shirt Size \_\_\_\_\_ Pant Size \_\_\_\_\_  
School Attending: \_\_\_\_\_  
Is this your first year playing in HJF league? Yes \_\_\_ No \_\_\_  
Parent/Guardian Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone# \_\_\_\_\_  
Relationship: \_\_\_\_\_

### Medical Background:

My child is in good general health and able to participate in the Hackensack Jr Football program. However, my child presently suffers or has suffered in the past from the following conditions of which you should be aware:

Allergies: \_\_\_\_\_ Asthma: Yes \_\_\_\_\_ No \_\_\_\_\_

Other: \_\_\_\_\_

In case of any emergency your child will be transported to the closes Hospital. Please Int.: \_\_\_\_\_

**GUIDELINES:** I agree that my child is between 8-14 years of age and I fully understand the following:

**CONDUCT:** Proper conduct is required by all participants. Inappropriate behavior will not be tolerated. Failure to meet this will result in being removed from the team/league.

**EDUCATION:** Our children's education is very important. Coaches may contact the schools from time to time to ensure that satisfactory grades are being met. If the player's grades are slipping the coach and parent will have a discussion.

**EQUIPMENT:** It is imperative that uniforms and other equipment issued to your child is returned in good condition, except for normal wear and tear. If your child's uniform or equipment is not returned or is damaged, other than normal wear and tear, you will be responsible for its replacement cost.

**GAME DAY VOLUNTEERING:** I or a member of my immediate family will volunteer for a minimum of 5 hours during home games. (Opportunities to volunteer will be listed on the website and you will be contacted by your team mom.)

**INSURANCE:** The league carries a limited medical insurance, which is intended to supplement your primary insurance. In the event that your child requires medical attention resulting from physical injury, a League Official must be insurance claim form must be complete and returned within 10 days of injury.

**PAYMENT:** Registration fees are non-refundable and must be submitted with this form. All returned checks are subject to a \$30 return check fee. If full fees are not submitted your child will not be registered.

**PHOTOGRAPHS:** I grant permission for the Hackensack Jr. Football League to use photos of my child on their website or in other publications.

I am the parent/guardian of the above participant and have READ and AGREE to all terms. I give permission for my child to be a candidate for participation in the Hackensack Junior Football program:

Printed Name: \_\_\_\_\_

Signature Name: \_\_\_\_\_

**REGISTRATION FEE = \$160.00**

Cash \_\_\_\_\_

Check \_\_\_\_\_

Money Order \_\_\_\_\_

Please make payable to: Hackensack Jr. Football

Hackensack Jr. Football welcomes residence of Hackensack/Maywood/Rochelle Pk/S. Hackensack

**APPLICATION MUST BE SUBMITTED WITH REGISTRATION FEE, SCHOOL ID, BIRTH CERTIFICATE**

**NO REFUNDS AFTER EQUIPMENT IS HANDED OUT**

Forms may be mailed to: Hackensack Recreation Depart. - 65 Central Ave. Hackensack, NJ 07601

201-646-8042