

Amount paid: _____

check# _____

Cash: _____

Cobra Football Registration 2016

Check one (grade in fall/2016)

<input type="checkbox"/> 1st & 2nd grade (flag)	\$100
<input type="checkbox"/> 3rd - 8th grade (tackle)	\$210
<input type="checkbox"/> More than one child playing football	\$275

A late fee of \$25 applies to all registrations after March 1, 2016.

NO EXCEPTIONS !!

Make checks payable to: Closter Junior Football or (CJF)

Mail to: 45 Bethany Circle

Closter, NJ 07624

Child's Name _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Date of Birth _____ Age _____ Grade (Sept, 2016) _____

Parent/Guardian Signature _____

I the undersigned parent/ guardian hereby release, League, it's organizers, sponsors, supervisors, and volunteer workers from any claim resulting from accident or injury to my child while participating in the activities of the organization, except as covered by liability insurance purchased by the organization. I agree to have my private medical insurance act as primary coverage for any injuries incurred. I agree that the CJF League will assign participants to a team appropriate for their age, weight, and ability.

I further agree to the following:

- 1 - To assist in the fundraising activities of the league.
- 2 - To return all equipment and uniforms at the end of the season.
- 3 - To abide by the coaches decisions regarding playing time and positions.

Parent's/Guardian's Signature _____ Date _____

Print Name _____

Refund Policy:

Partial refund will be made only when formal notification of withdrawal occurs before 1st game.
There will be a \$25 non-refundable processing fee charged to all applicants.