

Youth Flag Football

Fall 2014

10 Week Program starting the first week of September



**LIMITED SPOTS FOR FALL
REGISTER EARLY**



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Our program is associated with NFL Flag Football and is designed to educate young people about football while emphasizing participation and sportsmanship. Players learn skills and lessons that help them succeed both on and off the field. Age is determined by child's age as of September 1, 2014.

7-8 coed

For: Coed / Ages 7 & 8

Day: Tuesdays / 10 weeks

Date: Sept 2 - Nov 4

Time: 6pm or 7pm games

9-11 coed

For: Coed / Ages 9 - 11

Day: Thursdays / 10 weeks

Date: Sept 4 - Nov 6

Time: 6pm or 7pm games

12-14 Boys

For: Boys ages 12 - 14

Day: Fridays / 10 weeks

Date: Sept 5 - Nov 7

Time: 6pm or 7pm games

- No Registrations will be taken after August 29, 2014
- Every player will receive a reversible jersey and flags at their first game
- Practices & games will be held on our indoor turf field
- Week 1: Football Combine 6pm - 7pm (players will be placed on a team after combine)
- Week 2: 1 hour Practice session with your team (either at 6pm or 7pm)
- Weeks 3 - 10: Games

COST: \$80 for Members \$99 for Non-Members (No Refunds)

410-734-7300

2304 Churchville Road, Bel Air, MD 21015

www.thearenaclub.com

Youth Flag Football Registration Form

DAY(S) OF PROGRAM: _____ DATE(S) OF PROGRAM: _____

PARTICIPANT'S NAME: _____ MEMBER: **Y** **N**

AGE: _____ DOB: ____ / ____ / ____ MALE or FEMALE: _____

PARENT NAME (if participant is under 18): _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME #: _____ CELL #: _____

EMAIL: _____

EMERGENCY CONTACT: _____ CELL # _____

VOLUNTEER COACH: Parent - check here if you are intersted in coaching _____ Head _____ Asst _____

List coaching experience: _____

HEALTH INFORMATION: Please list any special needs, medical or behavioral conditions, or medications that we need to be aware of to ensure your child's safety (allergies, asthma, etc.)

RELEASE: I have read and answered to the best of my knowledge, the above questionnaire. I agree that all exercise and activities (including, but not limited to exercise classes, cardio, strength equipment, pools, field activities) shall be undertaken by me at my sole risk. I release Harford Health & Fitness Club, Inc., its officers, directors, employees and shareholders, from any claim for any injury to me personally, damage to my personal property, or theft thereof, while I am at the Harford Health & Fitness Club, including claims arising from negligence of Harford Health & Fitness Club employees or agents. I understand that I must be a current member in good standing at the time of service to receive member discount. I understand that all images (photographic and video) taken can be used in future marketing.

Signature / Parent or Legal Guardian must sign if participant is under 18

Date

PAYMENT: TYPE: _____ TOTAL AMOUNT: _____ DATE PAID: _____

VISA / MC # _____ EXP: _____

FOR OFFICE USE ONLY:

Staple Receipt Here

