Team Registration Form

Maple Hill JrSr High School PE Department and the Jrhs Student Council will host the annual Flag Football Tournament for grades $7 \& 8$ on Thursday, October 26th, 2023. The tournament will be from $2: 45-4: 30 \mathrm{pm}$. Cost to play is $\mathbf{\$ 5 . 0 0}$ per player. The games will be played on the inside of the track.
Players are encouraged to invite parents and family members to watch the tournament. Parents/guardians or designee will be required to pick up their child at 4:30 pm from the track at the JrSrHS.
Concessions will be available for purchase. Concession proceeds will support the Class of 2028 and the Class of 2029.

## Team Roster:

Teams will consist of 7-8 students.

| Option 1 | List $\mathbf{3}$ players you would like to have on your team. We will <br> guarantee at least one person from your list will be on your team. |
| :--- | :--- |
| Option 2 | Choose to be a free agent. We will assign you to a team. |

Students MUST be with a teacher from 2:00-2:40, you will not be allowed to roam around the school or be in the sports study hall. Students will be called to the field for a meeting at 2:40.

## Due Date

The cost to register is $\$ 5.00$ per person. $\$ 5.00$ and permission slips are due to Mrs. Sweet or Mr. Mastracy by Monday, October 23rd, 2023. You will not be able to play without a permission slip. Permission slips cannot be accepted late.

## 2023 MHMS Flag Football <br> Permission Form and Team Selection

My child, $\qquad$ has permission to participate in the flag football tournament on Thursday, October 26th. The tournament runs from 2:45-4:30 pm.
Parents/guardians or designees are required to pick up their child/children.
Parents/guardians/families are more than welcome to watch their child's team. Students must be with a teacher from 2:00-2:40 pm. Concessions will be available for purchase.

During the activity, I may be reached at:

## Parent/Guardian Cell Phone:

$\qquad$
Parent/Guardian Name: $\qquad$
(Parent/guardian Signature)
(Date)

If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:

Emergency Contact Name:
Relation to participant $\qquad$
Emergency Phone $\qquad$

## Student Name

## Check one option:

|  | Write the names of 3 players you would like to have on your team. <br> We will guarantee at least one player from your list. (First and Last <br> Names) <br> 1) |
| :--- | :--- | :--- |
| Option 1 | 2) |
| Option 2 | Free Agent |

