



# NPAA

## North Penn Athletic Association

• Home of the North Penn Squires •

### 2009 REGISTRATION FORM

Football       Cheerleading

Keystone State League  
Ages and Weights

	Age (as of 12/31)	Weight
Flag Team	5 and 6	N/A
55 lb. Team	7 - 8	65-70
65 lb. Team	9	80-85
	10	65-70
75 lb. Team	10 - 11	95-100
	12	80-85
90 lb. Team	12	110-115
	13	95-100
105 lb. Team	13 - 14	125-130
Cheerleading	5 - 14	N/A

Player/Cheerleader Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age on 12/31/09 \_\_\_\_\_

E-mail address \_\_\_\_\_

Years in Squires \_\_\_\_\_

Football/Cheerleading \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Cheerleader size (please circle)    YXS (4-5)    YS (6-8)    YM (10-12)    YL (14-16)    YXL (16+)    AS    AM    AL    AXL

#### REGISTRATION FEES

(please write check in the appropriate amount payable to "NPAA"; mail to address at the bottom along with this form)

	Feb-Apr	May-June	Jul-Aug
Football Registration Fee (per player)	\$ 75	\$ 100	\$125
Mandatory Fundraiser (per family)	\$ 50	\$ 50	\$ 50
Total	\$125	\$150	\$175
Cheerleading Registration Fee (per cheerleader)	\$ 50	\$ 65	\$ 75
Mandatory Fundraiser (per family)	\$ 50	\$ 50	\$ 50
Total	\$100	\$115	\$125

#### PARENT / GUARDIAN INFORMATION

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Guardian's Name \_\_\_\_\_  
(if different from Father and/or Mother)

#### ACCIDENT INSURANCE INFORMATION

Insurance Company \_\_\_\_\_ I.D. # \_\_\_\_\_ Group # \_\_\_\_\_

#### VOLUNTEER INFORMATION

The NPAA is a volunteer non-profit organization and we welcome and encourage each family to become involved. Listed below you will find various ways to volunteer. Please indicate at least one area in which you have an interest and would like to help.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Football Coach | <input type="checkbox"/> Football Team Mom | <input type="checkbox"/> Snack Bar                |
| <input type="checkbox"/> Cheering Coach | <input type="checkbox"/> Football Team Dad | <input type="checkbox"/> Communications/Publicity |
| <input type="checkbox"/> Sponsorship    | <input type="checkbox"/> Cheer Mom         | <input type="checkbox"/> Building & Grounds       |
| <input type="checkbox"/> Fundraising    | <input type="checkbox"/> Equipment         | <input type="checkbox"/> Banquet                  |
| <input type="checkbox"/> Recruiting     | <input type="checkbox"/> Field Maintenance | <input type="checkbox"/> Web Site                 |
| <input type="checkbox"/> Yearbook       | <input type="checkbox"/> First Aid/Medical | <input type="checkbox"/> Photography              |

**REFERRAL INFORMATION:** Were you referred by someone already involved with the NPAA? \_\_\_\_\_

PLEASE READ AND COMPLETE THE NEXT PAGE



**NORTH PENN ATHLETIC ASSOCIATION  
P.O. BOX 1213, NORTH WALES, PA 19454**



**NORTH PENN SQUIRES  
2009 FOOTBALL REGISTRATION FORM**

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My son / daughter \_\_\_\_\_ has my permission to participate in the Football/Cheerleading program of the North Penn Athletic Association for the 2009 season. I understand that participation in athletic competition, as well as practicing for athletic competition involves hazards and risks of personal injury, including but not limited to, fractured bones, lacerations, and damage to the nerves and nervous system, some of which may be serious and/or permanent in nature. I recognize that I have the right to inspect the condition of all equipment, playing surfaces and related facilities prior to use of same, and to have my son or daughter refrain from participation in the event of any defects or hazards. I assume all risk and hazards to such participation including transportation to and from activities. I hereby waive, release, absolve, indemnify, and agree to hold harmless the officers, managers, directors and coaches of the North Penn Athletic Association from any claim arising out of an injury to my son / daughter.

I further understand that the North Penn Athletic Association will not provide accident insurance of any kind and I am solely responsible for any medical and surgical bills which result out of an injury which may arise from my son's/daughter's participation in any of the programs of the North Penn Athletic Association.

I am solely responsible for equipment assigned to my son/daughter and will return said equipment at the completion of the season or as requested by the association. If I fail to return all equipment issued, I will reimburse the North Penn Athletic Association the full replacement cost of said equipment; football \$275; cheerleading \$150. I understand failure to sign this form will result in the disqualification of my child from further participation in the 2009 football season and I will not be entitled to any refund of registration and/or fundraising fees.

Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

PAID BY CHECK    CHECK # \_\_\_\_\_    AMT. PD \_\_\_\_\_    DATE \_\_\_\_\_  
 PAID BY CASH

Note: Your registration fee and the mandatory fundraiser automatically fulfills your financial commitment as a North Penn Athletic Association "Associate Member." The NPAA holds full member meetings twice per year and you will be notified of the dates and times. While attendance is not mandatory, we do welcome and encourage your attendance to help make your organization better.

**"Better Sportsmen Today, Better Citizens Tomorrow"**