



# Dover Patriots

## Dover Youth Sports and Activities Registration Form

IMPORTANT PLEASE PRINT ALL INFORMATION

Participant Name: First  Middle Initial  Last

Age(as of July 31st)  Date of Birth  School Attending

**Participant Division**

**Mighty Mite**  
 (5-6) 85lbs  
 (7) 55lbs

**Pee Wee**  
 (7-8) 105lbs  
 (9) 70lbs

**Midget**  
 (9-10) 125lbs  
 (11) 90lbs

**Junior Varsity**  
 (11-12) 150lbs  
 (13) 110lbs

**Varsity**  
 (13-14) 175lbs  
 (15) 135 lbs

Did you play for a Organization Last Year? Yes  No  Organization Name

**Parent/Guardian Contact Information**

Primary Guardian(s)

Address  City  State  Zip

Primary Phone  Secondary Phone

Email Address

**Emergency Contact Information Other Than Primary Guardian**

Emergency Contact  Phone Number

Family Physician  Phone Number

Any Medical Conditions (Asthma, Allergies, etc.)

Medication(s)

I/We the parent(s)/Guardian(s) of the above named participant, hereby verify that all the above information provided to be true and correct. I/We hereby give authorization for the above named participant to participate in any/all DYSA activities during the current season.

Parent/Guardian Name Signature  Date

### FOR LEAGUE USE ONLY

REGISTRATION	FEE	Check	Cash	Amount Paid	Balance	Date	Collected By
FOOTBALL/CHEER	\$240/\$200						
2nd Child Discount	\$215/\$175						
3rd Child Discount	\$190/\$150						
Deposit	\$120/\$100						
Scholarship							

PARENTS ARE RESPONSIBLE FOR REPORTING ANY CHANGES TO CONTACT INFORMATION TO DYSA MANAGEMENT