



RAMS MIDGET FOOTBALL

2008 REGISTRATION FORM

Registrations must be received by March 7, 2008.

For more information please contact Marlo Dunlop at 992-1655 or Dunlop@alberta.com

First Name: _____ Last Name: _____

Home Phone: _____ Address: _____

Email Address (that is checked regularly): _____

All notices will be sent by email - Phoning will only be done in emergencies.

Alberta Health Care No.: _____ Birth Date: (DD/MM/YY) ____/____/____

Height (ft-in): _____ Weight (lbs): _____

Age on April 1, 2008: ____ Grade on April 1, 2008: ____ & School: _____

Previous Football Experience: (number of years) _____ & Bantam Team _____

Football Team 2006: _____ Position: _____ 2nd Position: _____

Football Team 2007: _____ Position: _____ 2nd Position: _____

Position you would like to play on the RAMS: _____ 2nd Position: _____

Father's Name: First: _____ Last: _____ Phone: _____

Mother's Name: First: _____ Last: _____ Phone: _____

Injuries in Previous Years (2006 & 2007): _____

Allergies: _____

Asthma: _____

Other Medical Conditions: _____

Signature of Parent/Guardian: _____ Print Name: _____