

MIDDLETOWN VALLEY ATHLETIC ASSOCIATION (MVAA)
31 W. Main St. Suite A, Middletown, MD 21769 (301) 371-3423 (www.mvaasports.com)

Football

Name: \_\_\_\_\_ Phone # \_\_\_\_\_
Please Print Last First M.I.

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_
Number/Street City State Zip

Birth Date: \_\_\_\_\_ Grade enrolled in '11-'12 school year: \_\_\_\_\_ Weight: \_\_\_\_\_
Month/Day/Year

School Enrolled in '11-'12 school year: (Circle one below - Must live within the Middletown High School feeder district)

- Middletown Middle Middletown Prim/Elementary Myersville Elementary Wolfsville Elementary Home School

Parent/Guardian Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
Please Print Last First M.I.

Parent/Guardian With Different Last Name: \_\_\_\_\_ Phone #: \_\_\_\_\_
Please Print Last First M.I.

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FEES AND DUES

SPORTS FEES: A sport fee is due for each child participating in each sport . (See Fee schedule below.)

CHECK ONE BOX:

Table with 3 columns: Activity, Fee, and checkbox. Rows: FLAG FOOTBALL (5 & 6 yrs by 9/1/11) \$60, FOOTBALL \$100

\*\* Late Fee - Additional \$25.00 per family after May 28, 2011 \*\*

MEMBERSHIP DUES: \$90 Family Membership dues must be paid once a year.

Please complete the 2011 MVAA Family Membership Form.

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Having been informed of the provision of supervised sports for youth by the MVAA of Middletown, MD, I/We the parents (or Guardian) of the above named candidate, do hereby approve of his/her participation in any and all of the activities during the current season.

As parent/guardian, I grant permission for any MVAA Sports Program adult staff member to obtain emergency treatment for my child in the event of injury or illness during participation in any MVAA Sports Program activities.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN NAME: (Please Print): \_\_\_\_\_

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MVAA is a volunteer organization. MVAA expects at least one adult family member to volunteer during your child's sports season. Please print the adult's name and phone # and/or e-mail address and check the area(s) below:

Volunteer's Name Phone # E-mail
Division 2 Referee Assistant Coach Chain Gang Team Liaison