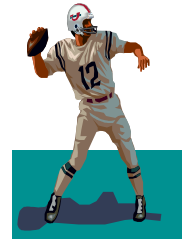


GREENSBURG RECREATION DEPARTMENT
520 NEW ALEXANDRIA ROAD, GREENSBURG, PA 15601
(724)834-4880 FAX (724)834-4895

YOUTH FOOTBALL PROGRAM
REGISTRATION: STARTS JULY 1, 2010

This program is for boys ages 7-12.
Cost is **\$60.00** per participant
A copy of Birth Certificate required if new player



Developmental Team -- 7 and 8 year olds with a 110 lb. weight limit. A player must be 7 or 8 on July 31st of the current year to be eligible for this age group.

J.V. Team -- 9 and 10 year olds with a 130 lb. weight limit. A player must be 9 or 10 on July 31 of the current year to be eligible for this age group.

Varsity Team -- 11 and 12 year olds with a 150 lb. weight limit. A player must be 11 or 12 on July 31 of the current year to be eligible for this age group.

- Birth or Baptismal certificates are required to participate and register.
- Weight limits are strictly enforced by the league.
- First scheduled practice is Monday, August 16 from 5:30-7:30 pm.
- Weigh In's are set for Saturday, Sept.11, 2010 at Latrobe Stadium. ***All players must attend weigh in's to be eligible to play – No Exceptions. Players must wear game jerseys.** (Spikes must be rubber & not interchangeable)
- All players must have mouthpieces attached to helmets throughout the season. They cannot be clear, must be a color.
- Anyone needing a special mouthpiece from their orthodontist must follow the same guidelines.
- Players who are borderline with weight limit will have 3 chances to make weight on Sept. 11. **(Only 3-No Exceptions)** Borderline players should discuss this with Frank Lehman – Recreation Director.
- Home Game Times Sundays
12:00 Noon –Developmental Team
1:30 PM – J.V. Team
3:00 PM –Varsity Team
(Times for away games are determined by the home team)
- Teams we play: South Greensburg, Hempfield, Latrobe, HAYAA, Pitcairn, Westmoreland Catholic, Derry, Norwin and White Oak.

Each teams' head coach will set practice schedule for each week.

Note: The Recreation Department reserves the right to limit the number of participants on each team. **New players must live in the Greensburg Salem School District.**



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724-834-4880**

**YOUTH FOOTBALL PROGRAM
REGISTRATION BEGINS JULY 1, 2010**



NAME _____ PHONE _____

ALT. PHONE _____

PARENT'S NAMES _____

ADDRESS _____ CITY _____ ZIP CODE _____

BIRTH DATE ____/____/____

AGE _____ School

Attended _____

RELEASE OF LIABILITY

The undersigned parent or guardian of the child who is an applicant herein and who is participating in the Youth Football program administered by the Greensburg Recreation Dept. herewith releases said Greensburg Recreation Dept. and those acting for it from any and all liability whatsoever for any and all injuries sustained by said child while said child is participating in any phase of the within said program.

PARENT/GUARDIAN SIGNATURE

PLEASE PRINT NAME

