



# 2018 PARTICIPANT INFORMATION

Sparks Pop Warner - PO Box 3377 - Sparks, NV 89432 – PH 775.560.4003



Legal Name of Participant (must match birth certificate):

Name: \_\_\_\_\_  
Last First M.I.

**FOR LEAGUE USE ONLY**

Date of Birth: \_\_\_\_\_

Age as if JULY 31<sup>st</sup> 2018: \_\_\_\_\_

DATE/TIME REGISTRATION  
RECEIVED  
\_\_\_\_\_

Mother's Birthdate: \_\_\_\_\_ Gender:  Male  Female

Month / Day Sport:  Football  Cheer

Played in Sparks Pop Warner Last Year?  Yes  NO

If so: \_\_\_\_\_  
Division / TEAM

Zoned Elementary School: \_\_\_\_\_

**Primary Parent/Guardian Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Other Parent/Guardian Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Emergency Contact Information (other than parent or guardian):**

Name: \_\_\_\_\_ Physician: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Please make sure the above information is accurate and correct. List any comments or concerns you'd like us to be aware of below. Requests will be taken into consideration, but are NEVER guaranteed. Thank you for your support and cooperation.

**FOR LEAGUE USE ONLY**

League Age: \_\_\_\_\_

Birth Cert.

Amount Received: \_\_\_\_\_

Weight at Reg: \_\_\_\_\_

Contract

Scholarship?

O/L? \_\_\_\_\_

Medical Form

Approved:

Division: \_\_\_\_\_

Physical

Denied:

Team: \_\_\_\_\_

Entered in AF? \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_



# 2018 PARENT AGREEMENT

Sparks Pop Warner - PO Box 3377 - Sparks, NV 89432 – PH 775.560.4003



I, the undersigned Parent/Guardian of \_\_\_\_\_, acknowledge that by registering the aforementioned child to play football with the Sparks Pop Warner (SPW) Program, I agree to support the following policies:

## Team Assignment Policy

- FOOTBALL ONLY - All players will be assigned to a team based on his age and weight in accordance with National Pop Warner rules. Participants will be placed on teams based off of their zoned Elementary School provided there is still room on the roster. If roster is full participant will be placed next available team.

## Attendance Policy CHEER / FOOTBALL

- Parents and Players will be required to sign the SPW Attendance Policy
- During the month of August, payers are expected to practice 4-5 days per week, for a maximum of 10 hours per week. Players are expected to practice 3 days per week, for a maximum of 6 hours per week after Labor Day until the end of the season.
- Parents are required to phone the Head Coach in advance if their child will miss a game or practice. Excused absences are defined by illness, injury, serious illness or death in family, or a conflict with religious holidays or education. Players who attend practice, but are unable to participate in the majority of the drills will be considered absent.
- Players missing practice, including excused absences, will be subject to limited playing time at the discretion of the Head Coach, in conjunction with the minimum play rule established by Pop Warner.

## Volunteer Participation, Fundraising and Equipment deposit

- CHEER / FOOTBALL - Each household is required to support the Snack Stand and Game Day volunteer duties, as scheduled by the Team Mom for each Team. Families with participants on multiple Teams will be responsible for volunteer duties in support of each Team.
- CHEER / FOOTBALL - Each household will be required to support the annual SPW raffle by selling a minimum of 10 raffle tickets at \$5 each or 5 for \$20. Raffle Tickets will be distributed at the Parent's Meeting in July at League Day. Participants will also be required to sell 1 Paddle to the Quarter Auction at \$40 and 1 Seat to the Quarter Auction \$15. Along with the raffle ticket sales those participants who sell 2 paddles and 2 seats will receive a SPW Sweatshirt.
- FOOTBALL ONLY - SPW may require a Postdated Check in the amount of \$150 Equipment Deposit that will be returned at the end of the season, pending the return of all uniforms and equipment on the designated date(s).

## Refunds

- **There are NO refunds for registration fees.** However, in some extenuating medical circumstances or if participant is moving out of area an exception can be made. The refund request procedure is to have the parent submit a written request explaining the reason for refund request to the President only. The Board of Directors will review the request. Upon board approval, a check will be mailed to the address on the registration form unless a different address is requested. There is always a \$50.00 dollar non-refundable processing fee as well as subject to costs incurred for personalized jerseys or apparel. Only participants who fail League Certification due to weight or health restrictions are eligible for refunds after August 15<sup>th</sup>.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_