



YOUTH FOOTBALL COMBINE - JAN. 13

Test your Skills, Speed & Strength

10am-12pm

ONLY \$10 for anyone who signs up for
the Flag Football League (or \$35 with No League)

Awards given for each Age Group!
Skills, Speed, and Strength Competitions

WINTER YOUTH FLAG FOOTBALL LEAGUE

WEEKLY GAMES AND PRACTICES

Only \$75 registration which includes Jersey
and 7 League Games and Weekly Practices.

League Begins January 17.

We will make every effort for games and
practices not to interfere with Basketball

Player's Name: _____

Birth Date: ___/___/___ Gender: ___ School _____ Grade _____

Parent Name: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Cell Phone: (_____) _____

Email (A working email address is required for participation!): _____

Shirt Size: YS (6-8) YM (10-12) YL (14-16) AS AM AL

Volunteer Coaches needed! Would you be willing to help Coach if needed? YES NO

In enrolling at Apex Sports Zone, participant understands that he/she attending the programs and using Apex Sports Zone and the facilities does so at his/her own risk. Apex Sports Zone and its owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which occur in or about any programs on the premises, She/he does hereby fully and forever release discharged hold harmless Apex Sports Zone, all associated facilities and its owner, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by Apex Sports Zone. Failure to do so may result in suspension from participation. Consent: I the undersigned parent or guardian/ participant do hereby grant authority to the staff at Apex Sports Zone to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize Apex Sports Zone and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional materials or team films.

Signature: _____ Date: _____ Print Name _____

Please mail this completed form, with full amount due, to:
Apex Sports Zone, 1425 N. Vandemark Rd., Sidney OH 45365
Make checks payable to: Apex Sports Zone