



2023 Tri-State Youth Flag Football League



1-2 Grade
\$30.00/Player

3-4 Grade
\$30.00/Player

5-6 Grade
\$30.00/Player

LEAGUE INFORMATION

Players will be placed on their individual teams once the registration deadline has passed. In order to ensure your child receives a shirt, registration form *and* payment must be received *before* the deadline on Friday, August 25th. Each team will have a Parent Representative (please notate if interested) this year who, along with our coaches, will communicate practice times, game schedules, etc. Games will be played on Sunday afternoons beginning on September 17th at Baxter Sports Complex, located at 909 48th Street in Fort Madison. The Fort Madison High School players/staff will provide coaching for teams again in 2023. For the 1st and 2nd Grade there will not be certified referees so there will need to be Parent Rep(s) who step in and control the game. Please remember the most important part is to have fun, grow, and learn!

For more information, please visit Fort Madison Football Inc. on Facebook, or on our website at www.bloodhoundfootball.com. Information is also at www.baxtersportscomplex.com.

Contact: Landon Bentley 319-372-2932 (BaxterSportsDirector@gmail.com)
Tony Johnson 319-470-3402 (tony@johnsontruckline.com)
Derek Doherty 319-470-6093 (Derek.doherty@fmcsc.com)

REGISTRATION FORM

Registration Deadline: Friday, August 25th

PLAYER INFORMATION—Print Legibly

Name: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: (____) _____ Birth Date: _____ Grade: _____ School: _____

Shirt Size: Youth S (6-8) Youth M (10-12) Youth L (14-16) Youth XL (18-20)

Adult S Adult M Adult L Adult XL

PARENT/GUARDIAN INFORMATION

Name: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____

I _____, being of sound mind and health, understand that with any sport or activity comes an inherent risk of injury, and that protective equipment does not prevent all injuries to players. With this in mind, I give permission for the above-named child to participate in all league activities. Furthermore, I do hereby waive, release, absolve, indemnify, and agree to hold harmless Fort Madison Football Inc., Baxter Sports Complex, and the organizer, sponsors, and/or supervisors, from any claim arising out of any injury to my child. I also understand that all equipment issued to my child is property of Fort Madison Football Inc., and that I am responsible for the equipment in the event that it is intentionally damaged or lost.

Signature: _____ Date: _____

Please Mail Check to:
Baxter Sports Complex
P.O. Box 587
Fort Madison, IA 52627