



Northeast Detroit Shamrocks 2007 Registration Form



Registration # _____

Football Players

First: _____ Last: _____

Address: _____

Phone: () _____ Birth Date: _____

New Player: Returning Player:

Parent/Guardian

First: _____ Last: _____

Emergency Contact Number: () _____

Last Report Card GPA: _____

Name of Brothers and Sisters That Play or Cheer

1. _____
2. _____
3. _____

Cash and/or Money Order Payments Only!!!

Parent/Guardian
Signature: _____

NED Shamrock Registrar's
Signature: _____

Website: www.nedshamrocks.org

Date: ____/____/2006

No Personal Checks Will Be Accepted After 07/01/06

Receipt Number: _____ \$ 200.00 Reg. Fee

Paid _____ of _____ \$ 10.00 Examination

OFFICE USE ONLY	
Age	_____
Height	_____
Weight	_____
Team Assignment	
<input type="checkbox"/>	Freshman
<input type="checkbox"/>	Junior Varsity
<input type="checkbox"/>	Varsity
Birth Certificate	<input type="checkbox"/>
Physical Exam	<input type="checkbox"/>
Agreement	<input type="checkbox"/>
Waiver	<input type="checkbox"/>
Player's Equipment	
Gm Jersey #	_____
Game Pants	_____
Helmet	_____
Practice Pants	_____
Practice Jersey	_____
Shoulder Pads	_____
Thigh Pads	_____
Hip Pads	_____
Butt Pad	_____
Knee Pads	_____
Practice Jersey	_____
<i>Make Cashier Checks and/or Money Orders payable to:</i>	
Northeast Detroit Shamrocks	
Mail all Payments to:	
5767 Grayton Detroit, Michigan 48224 (313) 886-4535	

Receipts Will Be Available upon Cash or Money Order Deposit

Absolutely "NO REFUNDS"

Balance Amount _____