



USCAA

Upper St. Clair Athletic Association
2008 Football Registration

Name: _____
(Last) (First)

Address: _____

Parents' Name: _____
(Mother) (Father)

Parents' E-Mail: _____

Phone: _____ School: _____

Birthday: _____ Age on 8/1/08: _____

Approximate Weight: _____ Height: _____

Will you be on vacation during season? If so, give date(s): _____

Please list any pre-existing medical conditions (i.e. asthma, allergies): _____

Fee: \$100.00 Per Player

FOOTBALL LEAGUE (Check One)

- 6 – 7 Years Old (must be under 8 on 8/1/08)
- 8 – 9 Years Old (must be under 10 on 8/1/08)
- 10 – 11 Years Old (must be under 12 on 8/1/08)
- 12 Years Old (must be under 13 on 8/1/08)
- (EXCEPTION may be made to a player weighing under 100 #s that does not turn 14 prior to December 1, 2007)
- 13 Years Old (must be under 14 on 8/1/08)
- (EXCEPTION may be made to a player weighing under 115 #s that does not turn 15 prior to December 1, 2007)

Experience

Number of years on organized football team: _____

Played for USCAA Football Team last year? _____

Name of Coach: _____

Positions Played during 2007 Season

Quarter Back Running Back Line Defensive Back

NO INSURANCE COVERAGE: Due to increasing cost, we have been forced to eliminate our medical (accidental injury) insurance coverage. I understand that the USCAA carries no medical coverage and that we, the parents, assume all financial responsibility for any injuries to our son/daughter that may occur during athletic events.

PLEASE NOTE: There is no guarantee to the amount of playing time. We will play all team members in every game. Your child's playing time will depend on how he deals with practices, attendance, initiative and more important, how he prepares himself both physically and mentally. This is a full contact sport. His coaches will make the final determination.

Parent's Signature _____ Date _____

PARENTS WE NEED YOUR HELP!!! Please mark where you can help!!!

Assistant Coach

Previous Experience Yes
 No

Director

Previous Experience Yes
 No

LATE REGISTRATION Make Check Payable to USCAA

Application deadline is July 4th.
All Applications received after this date
will be placed on a waiting list.

Mail to: Christopher Lee
1761 Partridge Run Road
Pittsburgh, PA 15241
(412) 854-4863

OFFICIAL USE

PAID Cash Check

Check #: _____

Received by: _____

