

**BELLEVILLE-ALBANY
BOBCAT
YOUTH
FOOTBALL, INC.**

PRE-REGISTRATION

PLEASE PRINT

NAME _____ BIRTHDAY _____
Month Day Year

ADDRESS _____

CITY & ZIP _____ SCHOOL _____

PHONE _____ GRADE THIS FALL _____

PARENT(S) NAME(S) _____

PARENT'S SIGNATURE _____

WILL YOU NEED A PRACTICE JERSEY? YES OR NO (CIRCLE ONE)

*NO FEES ARE REQUIRED AT THIS TIME – OFFICIAL REGISTRATION, AT WHICH TIME THE FEES WILL BE PAID, WILL BE HELD IN MID-JULY.

*THIS PRE-REGISTRATION FORM WILL GIVE US AN IDEA OF EQUIPMENT NEEDS, THE NUMBER OF TEAMS WE WILL HAVE, AND THE NUMBER OF COACHES NEEDED FOR THE UPCOMING SEASON.

*PLEASE RETURN THIS FORM TO YOUR SCHOOL'S OFFICE BY **MARCH 7TH**

*CHECK OUT OUR WEBSITE @ WWW.BABOBCATYOUTHFOOTBALL.COM

*ANY QUESTIONS OR NEED FOR FURTHER INFORMATION PLEASE CALL OR EMAIL:

STEVE MEIER, DIRECTOR
424-3589 OR meier_ythfootball@yahoo.com