



Waverly Futbol Club

Player Information Form

2013 - 2014 sports season*

Child's name:	
Age:	
Date of birth:	
School:	

Adress :	
City :	

Medical Conditions:	
Allergies:	

Parent's/guardian's name:	
Home phone:	
Cell phone:	
E-mail address :	
Alternate contact's name:	
Home phone:	
Cell phone:	
E-mail address :	

Notes:

**A new Emergency Contacts sheet must be submitted yearly, and every time information changes.*