



Pop Warner Little Scholars, Inc.
 586 Middletown Blvd. Suite C-100 ■ Langhorne ■ PA ■ 19047
 Phone: 215-752-2691 ■ Fax: 215-752-2879



2021 PARTICIPANT CONTRACT AND PARENTAL CONSENT FORM

Special Note: This form must be dated after January 1, 2020 and is applicable only for the 2021 season. This form must be submitted to your LOCAL Pop Warner organization prior to the athlete participating in Pop Warner. No other forms are acceptable. Every Pop Warner Association must have a fully completed and signed original of this form prior to allowing the athlete to participate.

Legal Name of Participant (must match birth certificate):

Last _____ First _____ Middle _____ Also known as _____

Address _____

City _____ State _____ Zip _____

Phone No: _____ Birth date _____ Gender: ___ Male ___ Female

School: _____ Grade Level (2021/2022 School Year): _____

Mailing Address if different from above: _____

Name of Parent/Guardian _____ Relationship to Athlete: _____

Address (if different from above) _____

City _____ State _____ Zip _____

Telephone No: _____ Email Address: _____

Emergency Contact Information (if the parent/guardian cannot be reached):

Name _____ Relationship to Athlete _____

Home Telephone No: _____ Cell or work No.: _____

Pop Warner Official Use Only:

Reg Number: _____ Witnessed By: _____

Participant Fee \$175.00

Amount Paid \$ _____

Type of Transaction: Cash ___ Check ___ Credit Card ___ ***\$10 fee

per TEAM PLAYED ON 2020 _____

WEIGHT AT SIGN UP: ⁹

Division of Play (circle one): _____ / DIII / DII / DI / Middle School /