

## 2017 SEASON SCHEDULE

Flag Football .....Aug. 1st– Sept. 7  
Registration Open:.....Sept. 7  
All Star Coaches & Referee Mtg @ Admin.....Sept. 7  
Coaches Meeting @ Admin 5:30-7:30p.m.....Sept. 21st  
First Season Game - FRIDAY.....Sept 28  
Final Game– FRIDAY .....Nov. 2nd  
\*Rain out dates only: Nov. 9 & 16

- Ages 6-12
- Boys & Girls
- Low Cost
- Friday Nights
- 6 Week Season
- League Fee Includes Flag Football *Sports of All Sorts* Jersey!

### AGE/GRADE ASSIGN DIVISION:

Age & grade of child dictate division assignments. Youth of younger age but in grade for next division grade may play “up” but older youth that are in lower grade may not play “down”. League is designed for youth ages 6-12 Years. Child **cannot** participate if they turn 13 yrs during League Play (on or before **Nov 3rd, 2017**)

#### **Cadet Division:**

**6-7 yrs Co-Ed (1st & 2nd Grade)**  
Each player will learn the basics of offense & defense. Passing, running, blocking, and working as a team will be the focus. Fundamentals & Sportsmanship will be emphasized throughout .

#### **Junior Division:**

**8-9 yrs Boys / Girls (3rd & 4th Grade )**  
Each player will learn the basics of offense & defense. Running set plays including passing will be the focus. Teamwork will be priority. Fundamentals & Sportsmanship will be emphasized throughout.

#### **Senior Division:**

**10-12 yrs Boys / Girls (5<sup>th</sup> & 6<sup>th</sup> Grade ) \***  
Each player will be given an opportunity to play each skill position. Fitness and teamwork will be priority. Fundamentals & Sportsmanship will be emphasized throughout. \***Child cannot participate if they turn 13 yrs during League Play.**

GREAT FUTURES START HERE.



BOYS & GIRLS CLUBS  
OF ARLINGTON



### CONTACT YOUR CLOSEST BRANCH FOR INFO:

**Main Branch**– 608 N. Elm St. Arlington TX. 76011  
**North Branch**– 2020 Baird Farm Rd 76006  
**East Branch**– 2011 Wynn Terrace, Arlington TX. 76010  
**Don Kromer Branch**– 200 E. Cravens Pk Dr. Arl TX. 76018  
**Administrative**– 817-275-6551 [www.bgearlington.org](http://www.bgearlington.org)

### LEAGUE BENEFITS

- Learning the rules, fundamentals and basics of offense & defense positions
- Learning lessons about teamwork and sportsmanship (e.g., respect for officials, coaches, and players)
- Forging relationships with positive adult role models and mentors, including Club staff, coaches and volunteers
- Improved fitness, conditioning and enhanced stress management skills

### VOLUNTEER COACHES NEEDED!

Become a coach or assistant coach for ANY of our athletic programs. *Experience preferred but not necessary.* **Must complete a volunteer application for '17-18 and pass a background check.** Must also participate in a coach's clinic & training for each specific sport. Training provided online through the National Youth Sports Coaches Association. Our coaches receive membership in NYSICA and lots of added benefits!!  
**CALL US OR SEE YOUR BRANCH STAFF TODAY!**



## FLAG FOOTBALL

### LEAGUE 2018

### Boys & Girls

### Ages 6-12 yrs

[www.bgearlington.org](http://www.bgearlington.org)

### 817.275.6551

### LEAGUE MISSION

To provide young people with opportunities for friendship, sportsmanship, skill development and healthy use of free time that will lead into successful adulthood.  
**\*THIS IS A SKILL DEVELOPMENT LEAGUE**



# 2018 FLAG FOOTBALL

## (Boys & Girls - Age 6-12)



**First Game:** FRIDAY, September 28, 2018 (game times between 5pm-8pm)  
**Final Games:** FRIDAY, Nov 2, 2018 ~ ALL GAMES ARE PLAYED DURING THE EVENING HOURS ON **FRIDAYS**. (Rain out Dates only: Nov 9 & 16)  
 SEE BRANCH MANAGER FOR INFORMATION ON TRANSPORTATION TO GAMES. ~  
**Location for Games & Events:** UTA Intramural Fields— 1100 Allan Saxe Parkway, Arlington, TX 76013  
 ~ **Practice Info:** TALK TO BRANCH MANAGER FOR INFO ON PRACTICES TIMES & OPTIONS.

**Current BGC Member?** Y / N **Location:** \_\_\_\_\_ **Gender:** M / F **School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Player Name:** (Please Print) \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Age:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Apt #:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

<p><b>How will child get to the game?</b>  <i>*Transportation TO the games is provided by BGC</i></p> <p>____ B&amp;GC Bus/Van        ____ Parent/Guardian        ____ Walk        ____ Other: _____</p>	<p><b>How will child get HOME?</b>  <i>*Transportation FROM games will not be provided!</i></p> <p>____ Parent/Guardian        ____ Walk        ____ Other: _____</p>	<p><b>Please Note: MUST check out with BGC staff for pick up!</b>  <b>Must be 18+ yrs old. ID must be shown when picking up.</b>  <i>*List 3 Additional persons, with phone numbers, authorized to pick up child (other than Parent/Guardian).</i></p> <p><b>Name &amp; Phone #:</b> _____  <b>Name &amp; Phone #:</b> _____  <b>Name &amp; Phone #:</b> _____</p>
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**Parent or Guardian Name:** \_\_\_\_\_ **Cell Phone Number:( \_\_\_\_\_ )** \_\_\_\_\_

**Alt Number:( \_\_\_\_\_ )** \_\_\_\_\_ **Parent's Email Address:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone Number:( \_\_\_\_\_ )** \_\_\_\_\_

**Does family have medical insurance?** Y / N **Insurance Company:** \_\_\_\_\_

**Policy Number:** \_\_\_\_\_ **Preferred Hospital:** \_\_\_\_\_

**Known health concerns:** please list any health concerns we need to be aware of during games & practices (i.e. asthma, heart conditions)

**League Division - Mark ONE:** \_\_\_\_\_ **Cadet Division (6-7yrs) /** \_\_\_\_\_ **Junior Division (8-9yrs) /** \_\_\_\_\_ **Senior Division (10-12yrs)**

<b>FEE SCHEDULE</b>	
<b>\$30</b>	<p><b>REGISTRATION FEE-</b> (Includes Sports Jersey) <b>Registration Ends : Sept 7, 2018</b> Registration Fees are <b>non-refundable</b> due to equipment cost, Referees, uniforms, and administrative fees</p> <p><b>&gt;&gt;&gt;Please Note:</b> You must submit this form <b>AND</b> make payment at your Branch. <u>Only money order or credit card payments accepted.</u></p>
<p><b>CHILD'S Jersey Size:</b> Please select ONE  <b>NOTE:</b> Not available in 'Youth Small'.</p> <p><b>Youth Sizes:</b> ____ YM ____ YL  <b>Adult Sizes</b> ____ SM ____ M ____ L ____ XL ____</p>	<p>I am a Parent interested in being involved (mark all that apply) <i>*be sure to complete vol. app.</i></p> <p>____ Coach ____ Asst. Coach ____ Score Keeper ____ Refreshments</p>

I, as a parent/guardian of named minor, do hereby release the Boys & Girls Clubs of Arlington (a.k.a. the "Club") from all **liability** to me, my child and my child's personal representative, assigns and heir for all claims which my child or I may have against the Club and/ or its sponsors resulting from participation in or connections to a Club-related activity. I approve of my son's/daughter's application for membership and/or participation in Boys & Girls Clubs of Arlington Sports Leagues. I will not hold the members of the Board, Staff or Leaders responsible for injury, which may occur while participating in above Boys & Girls Clubs of Arlington activities. I also acknowledge that medical insurance is not provided by the Boys & Girls Clubs of Arlington. I hereby authorize the Club, as my agent, to secure **medical treatment** as is deemed necessary and will, on behalf of said minor, assume and pay all expenses associated with such treatment in the event of accident, illness, or other capacity. I understand that the Club may use **testimonials, statements, and/ or photographs** of my child taken of his/ her involvement in Boys & Girls Clubs of Arlington activities. Also, I understand that, as a **youth recreation facility**, the Boys & Girls Club of Arlington observes an open door policy. I understand the Club staff do not maintain the right to grant "permission" for children to leave the facility, nor do the staff take the authority to insist or enforce them to stay. I certify that all of the information on this form is true and correct. I give my permission to the Club to **share information** about the participant listed on the application with the Boys & Girls Clubs of America (BGCA) for research purposes and/ or to evaluate the program's effectiveness. Information that will be disclosed to BGCA may include the information provided on school and other information collected by the Club including data collected via surveys or questionnaires . All information provided to BGCA will be kept confidential. **Players who have an unpaid balance from previous B&GC leagues will not be allowed to play until unpaid balance is paid in full.**

**Parent/ Guardian Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Internal Only: Paid?** Y / N **Date Received:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Date Processed:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Receipt #:** \_\_\_\_\_

**Amount Paid:** \_\_\_\_\_

**Payment Plan Balance:** \_\_\_\_\_