WAA Football Registration Form

☐ Check this box if your child played for WAA last year and there are no changes to your information. Turn in this form with your CQL registration form. Player's Name: ____ □ Junior □ Senior Phone #:_____ Primary e-mail address: Father's Name: Volunteer: ☐ Asst Coach (Chesterfield Cty Coach's #:_____) ☐ Game day chain gang (best game view on the field!) Home games (4) only: □ Time keeper □ Game Announcer ☐ Field / Concession set-up (Flag parents only) ☐ Field / Concession break-down (Senior parents only) Mother's Name:_____ Volunteer: ☐ Asst Coach (Chesterfield Cty Coach's #:_____) ☐ Game day chain gang (best game view on the field!) Home games (4) only: □ Time keeper ☐ Game Announcer ☐ Field / Concession set-up (Flag parents only) ☐ Field / Concession break-down (Senior parents only) NOTE: Concession stand operations will be assigned to one team for each of the four home games. Those Team Moms will coordinate their respective concessions work schedules. Set-up and break-down volunteers will assist those assigned team parents. Parent Signature: