



DAVIS HIGH SCHOOL BLUE DEVIL FOOTBALL 2010 FROSH REGISTRATION FORM

Please complete entire form. Please print clearly.

PARENT Name: _____ Email: _____

Work/Home Phone: _____ Cell: _____

PLAYER Name: _____ Email: _____

Current School: _____ Birthday: _____

Adult Shirt Size (circle): S M L XL XXL Shorts Size (circle): S M L XL XXL

Please pay fees by date they are due or pay them in advance.

Item	Payment Due	Amount Due	Total
Spirit Pack Two practice t-shirts, practice shorts, practice jersey, 5-pad girdle, mouth guard, game socks.	May 18	\$80	
Champions Conditioning Covers all costs associated with our 5 week training program	June 6 th	\$100	
Make checks payable to Davis Blue Devil Football			Amount Paid \$

Note : Additional charge for transportation and equipment costs will be requested Aug. 15th

Parent Signature: _____ Date _____

If Mailing Payment, Mail To:

Davis High School Football
315 W. 14th Street
Davis, CA 95616
Attn: Head Football Coach

For Office Use: Received By: _____ Date: _____ Cash: _____ Check: _____