



LEON FOOTBALL

2010 PLAYER INFORMATION FORM

PLAYER NAME:			
ADDRESS:			
HOME PHONE:			
CELL PHONE:			
EMAIL:			
BIRTHDATE:		Class of :	
FATHER'S NAME:			
MOTHER'S NAME			
FATHER'S CONTACT INFORMATION	<input type="checkbox"/> Check if Leon Grad Year: _____ <input type="checkbox"/> Check if former Leon Football Player		
ADDRESS:			
PHONE NUMBERS	HOME:		
	CELL:		
	WORK:		
EMAIL:			
MOTHER'S CONTACT INFORMATION:	<input type="checkbox"/> Check if Leon Grad Year: _____		
PHONE NUMBERS	HOME:		
	CELL:		
	WORK:		
EMAIL:			
IN CASE OF EMERGENCY:			

*Note phone numbers and email addresses will be distributed to other parents unless you request otherwise.

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