



2021 ELLWOOD CITY LITTLE WOLVERINES FOOTBALL PLAYER REGISTRATION

Player Name: _____

Age: _____

Date of Birth: _____

Grade Level: _____ (2021-2022 School Year)

Address: _____

Parent(s)/Guardian(s): _____

Parent(s)/Guardian(s) Contact information:

Is this a first year player?

Yes No

Are you interested in Coaching?

Yes No Maybe