2026 Tackle Football Registration Form

Mt. Vernon Parks & Recreation (Grades 3rd-6th)

3/4 Grade: MV teams will play each other and outside teams
5/6 Grade: Two MV teams will play outside teams
5/6 Grade Deadline: 8/7
3/4 Grade Deadline 8/14
Be on the lookout for evaluation nights!

Please fill out this form and return to the Parks & Recreation Department Office or to Registration Dates at APL, 716 Locust Street (Hedges Elem. Entrance #8) or mail to P. O. Box 324, Mt. Vernon, Indiana 47620.
Office hours are Monday - Friday from 8 a.m. to 5 p.m.
Fees: $70 per participant ($35 additional child same family)
ONLINE SIGNUPS AVAILABLE

Name _____ Grade _____

Address _____ School _____

(Main) Phone _____ D.O.B. _____ Age _____

Email_____ Approx. Weight _____

T-shirt size (circle one): YS YM YL (Youth Sizes) S M L XL (Adult Sizes)

Parent/Guardian Permission:

(Both parents or guardians must sign this permission form. If only one parent/guardian is available to sign, the parent signing must assume complete and absolute responsibility as set forth below)

We/I hereby grant permission for my child _____ to participate in the Youth Tackle Football program. We/I represent that my child is physically fit and suffers from no health issue which would prevent him/her from participating in this activity. We/I will assume all responsibility and obligations for my child in case of injury or accident sustained during participation in this program. We/I will release and hold harmless the City of Mt. Vernon, Mt. Vernon Parks Board, the Department, MSD of Mt. Vernon and all other paid and voluntary personnel from any and all obligation during the course of the program. We/I understand that in the event of injury that We/I are responsible for any & all medical expenses related to an injury while participating in this program/event. We/I give permission for the Mt. Vernon Park & Recreation Department to use individual photographs and team photographs as the department sees fit, including but not limited to, print and internet publication. We will all try to work together to build a fine program for all of the youth involved. Further, we assume responsibility for equipment issued [i.e. helmet, shoulder pads, pants w/pads] and agree to reimburse Parks Dept. of $150 if not returned upon completion of season.

_____	_____	_____
Date	Parent/Guardian Signature	Printed Name
_____	_____	_____
Date	Parent/Guardian Signature	Printed Name

Contact Information:
Main Phone: _____ Work Phone: _____ Emergency: _____

We need coaches
Will you please head coach? yes no / Assist Coach? yes no Coach Shirt Size: S M L XL

All weather updates will be posted on -- www.facebook.com/MVParksandRec

Rec. # _____ Date Rec'd _____ By _____