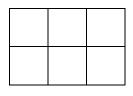
Prince Frederick Eagles

P.O. Box 2806 Prince Frederick, MD 20678 www.princefrederickeagles.com





FOOTBALL EQUIPMENT HANDOUT/RETURN FORM

① Participant Information			
Player Name		Age Group	
Parent/Guardian(s)			
Mailing Address			
Email Address(es)			
Equipment Return (Leave blank			
8 O Helmet O Shoulder Pads Notes:	O Pant Pads O Practice	Pants O Other:	
9	(10	
Signature (Parent/Guardian)	Date Si	gnature (PFE Official)	Date
Player Name Requipment: Parent/guardian ini O Helmet O Shoulder Pads Notes:	O Pant Pads	ibution O Practice Pants	_ O Other
As the Parent/Guardian of the I agree the information listed is correct All loaned equipment here specified w I agree to return all equipment clean, d If any of these items are not returned o I understand that I must pay IN FULL register ANY child(ren) and participate Replacement Costs: Helmet - \$100 Shoulder Pads - \$60	and the Prince Frederick Eag ill be returned to the Prince Fr ry, and in similar condition w r have been lost, altered, or da the cost of replacement of said e in ANY Prince Frederick Ea	ederick Eagles at the concluthout modification of <i>inclu</i> maged, I will be responsible items plus restocking fee by gles activity or sport.	usion of this football season. ding tape, stickers, and paint. e for their replacement.
Signature (Parent/Guardian)	Date	Signature (PFE Official)	Date