

# Football Player Contract

Name:				Phone:		
Address:		Email:				
City:	x:			Zip:		
Date of Birth:		Age:		Height:	Weight:	
School Attending:		(Fall 2015)	Grade:		-0.000-00-00-001	
Did you play last year:	☐ Yes	□ No	Coacl	h / Team:		
Physical Examination Sta	tement:					
		_ have exar	mined			
and found him/her physical	ly capable of	playing (ch	eck one: 🗆	tackle or 🗆 fla	ag) football.	
Total Control	F 178				(B.C)	
Health Care Provider's Sign				Date:		
nealth Care Provider's Sign			Date:			
Parents Acknowledgemer	nt:					
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# **Sample Of A Semi Pro Football Contract**

Wenbin Ji

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