City of Torrance Community Services Department ★ RECREATION SERVICES DIVISION (310) 618-2930 ★ www.TorranceCA.Gov/YouthFlagFootball

Needed! Coaches Aolunteer

TORRANGE COED 28 FLACENTRAII

\$79.00 Resident \$89.00 Non-Resident Includes Uniform Shirt

- Teams will be formed by grade and school.
- Leagues are tentatively scheduled to begin on Saturday, September 23, 2023.
- Games will be primarily played on Saturdays. (6-8 grades may play weeknights).
- There will be no full refunds given and only partial refunds of 80% prior to September 15, 2023.

Resident registration begins June 13, 2023. Non-resident registration begins June 20, 2023 and ends September 5, 2023 at 5:00 p.m.

Registration is limited!

Mail-In Registration: Complete the Permission Slip on backside. Please send a separate form and check for each child, along with proof of your Torrance residency. Forms must be received by September 5, 2023 at 5:00 p.m.

Walk-In/ Fax-In Registration: Complete the Permission Slip on backside along with your credit card information and fax to (310) 781-7598 or bring to 3031 Torrance Blvd.

Online Registration: Can be done at www.torranceCA.Gov/ClassRegistration



"Creating and Enriching Community through People, Programs and Partnerships"

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Volunteer Head Coach positions are limited to one per team. If you wish to volunteer, you must complete a Volunteer Coach's Application online at www.TorranceCA.Gov/VolunteerProgram. City policy requires volunteers to be fingerprinted annually. Volunteer coaches will receive a credit of the activity fee upon return of the equipment at the end of the season. If your team does not have a volunteer coach, they will be a game-only team with no practices during the season.

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Permission Slip	Shirt Size:	YS YI	M YL	AS	AM A	L AXL	AXXL	
		has	mv permi	ssion to	participate	in the City	of Torrance	e Community Services
Department's Youth Flag Football Program. I affirm that he/she is in the grade, and that his/her birthday is school. I hereby								
release and discharg	ge the City of To es from any lial	orrance, the pility whatso	Torrance (ever, resu	Commu Iting fro	nity Service m or in any	s Departn	nent, and ea	ach and all of their any injury or damage
Parent / Guardian Na	ame (please print)						
Signature of Parent /	Guardian							
Address					City			Zip
Home Phone () Cell Phone			Cell Phone	e () Email _			l
A non-refundable surcharge will be added to all credit and debit card transactions.								
I hereby authorize the	e use of my:	☐ Master(Card 🔲	Visa	Discove	er 🔲 Am	nerican Exp	
Name as it appears o	on the card: (ple	ease print)						TORRANCE California
Credit Card #:			Ex	oiration	Date: Month	n Ye	ear	For Official Use Only:
Signature:					CVV			
Please make check	s payable to th	ne "City of	Torrance.	" DO N	OT SEND C	CASH		
If registering through mail, send to:								Receipt#
ATTN: Registration								
City of Torrance Community Services Department • 3031 Torrance Blvd. • Torrance, CA 90503							503	Date

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