



**SPORTS AND ATHLETICS SECTION  
DIVISION OF COMMUNITY RESOURCES**

77 Reads Way • New Castle, DE 19720

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 @nccdesports [www.nccdesports.com](http://www.nccdesports.com)

## 2021 FALL NFL YOUTH FLAG FOOTBALL LEAGUE

New Castle County is excited to offer **co-ed** youth flag football leagues at two locations:  
**Delcastle Park** and **Glasgow Park**. Program highlights are listed below.

**Coaches and officials needed!**



<b>Locations</b>	Delcastle Recreation Park, 968 McKennans Church Road, Wilmington, DE 19808 Glasgow Regional Park, 2275 Pulaski Hwy, Newark, DE 19702
<b>Registration</b>	<i>Online and mail in registration opens June 25</i> All participants must complete a two-step registration process: <ul style="list-style-type: none"> <li>• Submit this registration form, along with payment, to the New Castle County Sports Office, or register online with a credit card payment at <a href="http://www.nccdesports.com">www.nccdesports.com</a>, and</li> <li>• Complete and return a concussion information form (must be signed by player &amp; parent).</li> </ul>
<b>Format</b>	Four one-hour clinics (over 2 weeks), 6-8 games and playoffs.
<b>Dates/Times</b>	Program will begin the week of Mon, Aug 23. Practice/Clinic sessions are from 6:00-7:00pm. The <b>Glasgow</b> league will meet on Mon/Wed, and the <b>Delcastle</b> league will meet on Tue/Thu. Following the two weeks of practices/clinics, games will begin on Saturday, September 11 (all games played on Saturdays). Season runs August 23 – November 6, 2021.
<b>Program Highlights</b>	Open to boys & girls, 6-14 years old (Must be 6 by Dec 31; can't turn 15 before Dec 31). Age divisions will be split based on registration numbers. Up to eight players will be placed onto each team. <i>All players will be given an equal opportunity to play.</i> Reversible jersey with NFL team colors & logo and NFL flag belt included with registration. Individual awards for first and second place team members.
<b>Fee</b>	\$95 per child

For real-time program updates and announcements, follow the Sports Office on Twitter [@nccdesports](https://twitter.com/nccdesports).



# 2021 FALL NFL YOUTH FLAG FOOTBALL LEAGUE REGISTRATION FORM

Registrations not accepted without payment (credit cards or checks / money orders made payable to New Castle County). Checks (no cash, please) should be made payable to "NCC". Registrations should be mailed to: New Castle County • ATTN: Sports and Athletics • 77 Reads Way • New Castle, DE 19720

**Register online at [nccdesports.com](http://nccdesports.com) (payment required at time of registration)**

Participant Name				Birth Date		Age (as of		Grade	
Address					City, State, Zip Code				
Parent / Guardian 1		Relationship to Player		Phone Number		Email			
Parent / Guardian 2		Relationship to Player		Phone Number		Email			
Location (circle one)		Delcastle Park				Glasgow Park			
Jersey Size* (circle one)	YS	YM	YL	YXL	AM	AL	AXL	A2X	
<p><i>*NFL FLAG Jerseys are not sized like a normal t-shirt*</i>  <b>Please review the sizing chart on NCC NFL FLAG webpage. If your child is between sizes, or on the border, choose the larger option.</b></p>									
Select Grade/Division for 21-22 School Yr. (circle one)	K & 1 <sup>st</sup> (7U)		2 <sup>nd</sup> – 4 <sup>th</sup> (9U)		5 <sup>th</sup> – 6 <sup>th</sup> (11U)		7 <sup>th</sup> – 9 <sup>th</sup> (14U)		
Interested in coaching and/or officiating? (circle one)		Coaching			Officiating			Both	

### Participation Agreement

I give permission for my child to participate in a Recreation Program sponsored by New Castle County that he/she is currently registering for with the Department of Community Services. I agree that my child will abide by all rules and regulations adopted and published by New Castle County relating to the operation and conduct of the program and the use of the facilities provided for the program. I understand that the failure of my child to observe these rules and regulations may result in his/her being excluded from participation in the program.

I represent that my child is physically able to participate in the program. I fully understand that his/her participation may entail the risk of physical injury. I agree to waive any claim of any kind whatsoever, whether resulting from an injury or otherwise, and further agree to release, indemnify, and hold harmless the program, New Castle County, and their respective directors, officers, employees, agents and/or representatives from any and all liability occurring as a result of his/her participation in the program. I will be personally responsible for any financial costs incurred as a result of his/her participation in the program, including, without limitation, transportation and/or medical expenses incurred as a result of any injury. Furthermore, I understand that New Castle County assumes no liability for lost, misplaced, stolen, and/or damaged property and I hereby agree to release New Castle County from such liability.

***The undersigned has/have read and voluntarily signed this waiver / participation agreement.***

List any Physical Limitations

Parent / Guardian Name (print)

Signature

Date

For Office Use	Date	Amount	Check Name	Check No. / Bank No.
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CHECK HERE to pay with a credit card. You will be contacted by phone for payment information.  
*American Express, Discover Card, MasterCard, and Visa are accepted*