

## 2008 Cheerleading Tryout Registration SVJFAC

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Emergency # \_\_\_\_\_

Birth date: \_\_\_\_\_ Age on **8/1/08**: \_\_\_\_\_

School: \_\_\_\_\_ Grade **Fall 2008**: \_\_\_\_\_

Please check the appropriate squad that applies to the grade level your child will be entering during for the **Fall of 2008**:

\_\_\_\_\_ Grades 1 and 2

\_\_\_\_\_ Grades 5 and 6

\_\_\_\_\_ Grades 3 and 4

\_\_\_\_\_ Grades 7 and 8

Mascot \_\_\_\_\_ Ages 4-5 by 8/1/08

*Please note: Any child who had successfully achieved a spot on a school district squad will be ineligible for SVJFAC.*

**In order to plan for the 2008 season, please let us know the following:**

\* \_\_\_\_\_ My child will be trying out for the competitive squad. (Grades 1 & 2 not eligible.)

\*This information can change anytime prior to tryouts.

If your child participated in the cheer program during 2007 (Welcome Back!!), please indicate for which team: \_\_\_\_\_

\_\_\_\_\_ has my permission to tryout for cheerleading. I understand that she or he must be covered by a parent's or guardian's insurance policy to participate in the tryouts. I agree NOT to hold the cheerleading coordinators, helpers, SVJFAC, its Board of Directors and members as well as Cranberry Township and the Seneca Valley School District responsible in any way due to an injury which may occur during practice or the tryout period. I accept full responsibility for my child's participation during this period.

Insurance Carrier and Policy #: \_\_\_\_\_

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_