

Vigo Youth Football League Cheerleading

AGES: 4-12

Registration Form

Membership Fee: \$75.00 registration

LAST DAY TO REGISTER JULY 27th, 2016

- Uniforms **will NOT BE ORDERED UNTIL PAYMENT IS PAID IN FULL**
- You may also include payment with this form and mail to : Cheerleading VYFL, P.O. Box 3142, Terre Haute, IN 47803
- A copy of the cheerleader's birth certificate may be required if the child's age is questioned.
- Uniforms will not be handed out at time of registration. Uniform includes (shell top, skirt, briefs, hair bow and poms)

Please Print Clearly

Cheerleader's Name

_____/_____/_____
Date of Birth

Age (as of June 30)

Cheerleader's Complete Address

City

State

Zip Code

Parents/ Guardian Name

Relationship to participant

BEST Contact number

E-mail Address

Secondary contact Name

Relationship to participant

BEST contact number

Secondary E-mail Address

CHEER TEAMS WILL NOT BE DIVIDED IN AGE GROUPS. WE ARE WANTING TO GIVE YOU THE OPPORTUNITY TO CHEER FOR YOUR FAVORITE PLAYER'S TEAM. IF YOU ARE WANTING TO CHEER FOR A PARTICULAR PLAYER PLEASE INDICATE THE NAME AND GRADE LEVEL. REMEMBER THERE IS A 15 PERSON CAP ON TEAMS SO GET REGISTERED EARLY TO ASSURE YOU CHEER FOR THE TEAM YOU WANT. WE WILL THEN DIVIDED OVER FLOW TO DIFFERENT TEAMS.

If you do not have a preferences for a team please check this box and we will assign you accordingly to make sure that each team is as equal as possible.

Football Player's Name

Football Player's Grade

School or Team Name

If the player has a medical condition that could affect or limit their participation please notify the coach as soon as your child is assigned to a team. If the player's medical condition could require immediate medical attention you are responsible to have somebody present at all times to provide immediate treatment if necessary.

I / We, the Parents or Guardian of the Above-named Candidate for a Position on a Vigo Youth Football League Cheerleading Team, Hereby Give My/Our Approval of His/Her Participation in Any and All Vigo Youth Football League Activities. I / We Assume All Risks and Hazards Incidental to Such Participation Including Transportation to and from the Activities; and I / We Waive, Release, Absolve, Indemnify and Agree to Hold Harmless Vigo Youth Football League, Sponsors, Supervisors, Participants, and Parents Transporting My/Our Child(ren) to and from Activities for Any Claim Arising out of Injury to My/Our Child(ren) Whether the Result of Negligence or for Any Other Cause, Except to the Extent and in the Amount Covered by the Accidental or Liability Insurance. I / We Agree to Abide by the Rules Set Forth by Vigo Youth Football League.

Name: _____ **Date:** _____