

2019 Recreaction Cheer Registration Form

1050 Wildcat Drive Kingsland, Ga 31548 • 912-729-5600

Players Name						
FIRST	MIDDLE		LAST			
Date of Birth MM/DD/YYYY			Gender	MALE	FEMALE	
Age divisionCHOOSE ON 3-5 years old 6-8 years (MASCOT) (CHEERLI Where Do You Want To Have St. Marys Kingslar List Any Siblings also participa	old EADER) Practice?CH	Woodbine	R)	11-12 years old (CHEERLEADER) No Preference neerleading		
Sibling name		Date of Birth				
Sibling name		Date of Birth				
Sibling name		Date of Birth				
List Any Medical or Special need that we need to be aware of:						
Parent/Guardian Name						
Phone Number/Type ()				CELL	HOME
Phone Number/Type ()				CELL	HOME
Valid Email						
Address						
Street						
City		State		Zip		
Your signature verifies that you have received, read, understand, accept, and agree to abide by the liability waiver, Return to Play Policy, Parent Code of Ethics, and CCPSA Zero Tolerance Policy.						
Parent/Legal Guardian Signature				Date		