

# REGISTRATION FORM

**FBYFL Cheer Extravaganza**  
**November 1, 2009**  
**1pm**

Every cheerleader participating must have a completed form turned in. Directors are responsible for combining all forms and completing a cover sheet for each squad from their franchise. Once the cover sheet is attached to all the required paperwork, the completed registration packet is due **September 28, 2009**.

**All cheerleaders participating in the Extravaganza must fill out completely.**  
**Please print clearly.**

Franchise Name: \_\_\_\_\_ Coach's Name: \_\_\_\_\_

Cheerleader's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Medications (if any) \_\_\_\_\_ Allergies (if any) \_\_\_\_\_

Insurance \_\_\_\_\_ Policy # \_\_\_\_\_

Insurance Phone \_\_\_\_\_

I understand that, \_\_\_\_\_, will be participating in the 2009 FBYFL Cheer Extravaganza. I am also aware of the dangers and injuries that can occur while participating in this sport. I will not hold FBYFL, FBYFL Cheer Board, the Extravaganza Officials or the location responsible for any injuries that might occur during this event. **I also understand that if my child registers and is unable to participate in the event for whatever reason, a fee of \$10.00 will be assessed to me.** All of the above insurance information is true and accurate and I give the Extravaganza Officials my permission to administer medical care if needed.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

