

LUTHERVILLE TIMONIUM RECREATION COUNCIL

CHEERLEADING REGISTRATION FORM

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

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

Home Phone: \_\_\_\_\_

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

Cheerleader Date of Birth: \_\_\_\_\_

Cheerleader's School and Grade as of September 2009: \_\_\_\_\_

Has your daughter cheered for LTRC or any other program previously? Yes  No

Total years of experience? \_\_\_\_\_

Parent/Guardian Information:

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Home Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

Additional Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

If there is anyone additional that can be notified in case of emergency, please enter here:

\_\_\_\_\_

In case of emergency, I hereby give my permission for a coach, the league commissioner or program representative to call 911 and have my child transported to the hospital:

Signature of parent/guardian: \_\_\_\_\_

Printed name of parent/guardian: \_\_\_\_\_

Please list any siblings participating in the LTRC Cheerleading program:

\_\_\_\_\_

FOR THE PROTECTION OF THE PARTICIPANT:

**Cheerleading is a physical sport where teams are required to work together to not only cheer, but perform physical stunts (the older the group, the more advanced the cheerleading stunts). We cannot assist the above participant appropriately, safely and/or fairly if the following section is not completed properly:**

1. Is there any medical condition, health factor, physical limitation and/or learning disability that may affect your child's performance or behavior in this activity? \_\_\_\_\_
  
2. If your child is taking any prescribed medications that could affect their performance in this activity, please list here. \_\_\_\_\_
  
3. Does the participant require any special accommodations? \_\_\_\_\_  
If yes, please state: \_\_\_\_\_
  
4. Is there any other information that should be known about the participant that could affect their safety and performance? \_\_\_\_\_

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I hereby state that my child is in good health and able to participate in this program. I agree that I will not hold Lutherville Timonium Recreation Council, the organizers, sponsors, commissioner, coaches, trainers, supervisors, volunteer leaders, participants or any other similar Recreation and Parks Council representatives, members or participants responsible for injuries or unforeseen accidents to this participant during any activities relating to LTRC Cheerleading. I agree to inform the Lutherville Timonium Recreation Council Cheerleading Commissioner or coaches of any medical or health factors which may develop or occur that could affect this participant.

Signature of parent/guardian: \_\_\_\_\_

Printed name of parent/guardian: \_\_\_\_\_

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Registration:

Check# \_\_\_\_\_ Cash \_\_\_\_\_ Date: \_\_\_\_\_

Please note that this participant will not be issued a uniform until this registration has been paid in full. If the registration has been paid by check, the check must clear our bank before a uniform can be issued. If a check is returned, LTRC will assess a \$25.00 fee.

All uniforms issued are for use during the season and must be returned in the condition in which they were issued. If a uniform is returned and declared damaged then a replacement cost for a new uniform of \$150.00 will be assessed.