WEST BABYLON CHEERLEADING ASSOCIATION

2019 CHEER REGISTRATION APPLICATION

CHILD'S NAME (First/Last):			GENDER: M / F
ADDRESS:			
CITY:	STATE	2: ZIP: _	
PHONE: ()	DATE OF BIRTH:	AGE	E: (as of 11/30/19):
LIST ALL ALLERGIES:			
PARENT/GUARDIA	N EMERGENCY CONT	<u>'ACT – PLEASE</u>	E PRINT NEATLY!
NAME (First, Last):			
EMAIL ADDRESS:			
HOME PHONE: ()	CE	LL PHONE: ()
SIGNATURE PARENT/GUARI	DIAN:		DATE:
I know that participation in cheerleading may result in injury to physician cannot be reached, I hereby authorize my child listed participation in all activities of the WBCA. Inc. I also understa insurance and do hereby, release, absolve, indemnify and agree I and from activities, for any claim arising out of any injury to my participating within the WBCA I have read and received a co	above to be treated by another physician who is nd that any injury to my child is not covered medic o hold harmless the WBFL, Inc. associated organizz child except to the extent and in the amount covere	available. I, the parent or guardian ally by the WBCA, Inc. except to b ations, the organizers, sponsors, su ed by accident or liability insurance	i of the child, assume all risks and hazards incidental to such the extent and in the amount covered by accident or liability pervisors, participants and any persons transporting child to e. By my signature above as a parent/guardian of a child

for my child's image to be used on the WBCA social media accounts.

NO REFUNDS AFTER 08/01/2019 Parent Initials:

Please make check payable to West Babylon Cheerleading Association (WBCA). Should you not be able to make an in-person registration please mail application and check to 26 Railroad Ave #162, Babylon, NY 11702 no later than 6/1/19. Early registration discounts, if any, expire as indicated and no exceptions will be made. WBCA reserves the right to suspend all discounts at their discretion.

DO NOT FILL OUT BELOW THIS LINE - FOR LEAGUE USE ONLY

NEW	RETURNING - TEAM LAST YEAR:				ТОТА			L # CHILD. REG.		
CASH	AMT:		C	REDIT	CARD	1	AMT:			
CHECK	AMT:		CHEC	CK #:	1	NAME (ON CHEC	CK:		
WRITTEN O	ON CHECK:	СН	ILD'S N	AME	C	HILD'S	AGE	PH	ONE NUN	MBER
CHEERLEA	DING:	5 6	7	8	9	10	11	12	13	