



2017 – 2018 Registration Form



TEAM PLACEMENT (Office Use Only):

Athlete Name:	
Age on December 31, 2017:	Date of Birth (mm/dd/yy): / /
Health #:	Athlete Cell:
School:	Grade in Fall:
Athlete Preferred Placement: <small>(circle all that apply)</small> <small>*Only available for WCS grades 7-12 students</small>	
Cheer: Scholastic* All-Star Dance: Pom* Jazz* Hip Hop*	

Parent/Guardians Information: Please provide Primary and Secondary contact	
Primary Name & Relationship to Child:	
Home Phone:	Cell Phone:
Secondary Name & Relationship to Child:	
Home Phone:	Cell Phone:
Primary Email:	
Mailing address:	
Emergency Contact Name & Cell Phone Number <small>(will only be used if Primary and Secondary Contacts cannot be reached).</small>	

How did you hear about our program: _____

Medical Information
Please list any known allergies:
Please list any medical conditions we should be aware of:

PLEASE TURN OVER

Waiver and Rules and Regulations agreement

I, the undersigned parent/guardian do hereby grant permission for my son/daughter to train at Airbourne Cheer Athletics at Weyburn Gymnastics Club. I acknowledge, understand and agree that by participating in cheerleading/training, there is a possibility of physical injury/illness and that my son/daughter is assuming risk of such injury/illness by his/her participation. In order that my son/daughter may receive the necessary medical treatment in the event of injury/illness, I hereby authorize the coaches and staff of Airbourne Cheer Athletics and/or Weyburn Gymnastics Club to facilitate medical treatment for my son/daughter for such injury/illness sustained during time in the gym or related gym events including but not limited to practices, camps, and/or competitions. We also waive and absolve Airbourne Cheer Athletics and/or Weyburn Gymnastics Club, the coaches, advisors, sponsors, parent volunteers, the staff and/or volunteers of any of the venues in which we practice or perform any and all liability and responsibility for said injury/illness. I authorize Airbourne Cheer Athletics and/or Weyburn Gymnastics Club to use photographs and/or video recordings taken of me/my child at any cheerleading event for promotional purposes. The mediums may include website, Facebook page, newspaper articles, and/or press releases.

Parent/Guardian Signature: _____ Date: _____

FOR OFFICE USE ONLY:

- | | | |
|---|------------------------|-----------------------|
| <input type="checkbox"/> Registration Fee | Amount: \$ _____ | Staff Initials: _____ |
| Payment Method: | Cash / Cheque # _____ | Checked by: _____ |
| <input type="checkbox"/> Registered in Database | Staff Initials: _____ | Checked by : _____ |
| <input type="checkbox"/> Cheer Placement Checklists | Tumbling: _____ | Stunting: _____ |
| <input type="checkbox"/> Dance Placement Choreo | Pom: _____ Jazz: _____ | Hip Hop: _____ |

Staff Recommendation: _____

- Team Placement Notification: Email Text Phone Staff initials: _____