

## 2016 CYO Cheerleader Registration Form - Please Print all information

Team Parish/Organization: \_\_\_\_\_ Circle one: **PW** **Grammar**  
Cheerleader Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age as of 7/1/16: \_\_\_\_\_  
Cheerleader Address: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
Check which applies:  
\_\_\_\_ Cheerleader Attends School. School \_\_\_\_\_ Grade \_\_\_\_\_  
\_\_\_\_ \*Cheerleader is a GED student  
\_\_\_\_ \*Cheerleader is Home Schooled  
\*Per CYO Rule 4, written verification must be attached for any GED or Home Schooled student.

Check which applies:  
\_\_\_\_ \*Cheerleader's family is **registered** with a Catholic Parish as of 9/1/16. Parish registered \_\_\_\_\_  
\*Per CYO Rules, if registered parish is different from team parish, Parish Verification Form below must be completed.  
\_\_\_\_ Cheerleader's family is Catholic but not registered at a Parish \_\_\_\_ Cheerleader's family is not Catholic

**Insurance Confirmation:** I am aware that my child may be injured while participating in the BC CYO Cheerleading program. Any costs associated with an injury sustained by my child while participating in the BC CYO Cheerleading program are my responsibility. The Cheerleader registered on this form has medical insurance, which is **mandatory** for participation in BC CYO Cheerleading. I am responsible for immediately informing my child's coach of any changes to the information provided on this form.

**Media Consent:** I hereby give consent to the BC CYO to use any photos, quotes or images that reflect my child's/family image. I will not hold BC CYO responsible for any misrepresentation by the media or mistakes appearing in printed or electronic media.

**I understand that any false information or forgeries will result in the Cheerleader's dismissal from the program.**

Parent (or Legal Guardian) Name (Print): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Relationship to Cheerleader: \_\_\_\_\_ Email: \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Parish Moderator:** I have reviewed the information on this form and, to the best of my knowledge, it is true. I have a copy of the Cheerleader's birth certificate and Emergency Care Information on file. Any false information or forgeries will result in the Cheerleader's dismissal from the program per CYO Rules.

**Parish Moderator's Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

### Parish Verification Form

**PARENTS:** If your cheerleader is a registered parishioner of a parish other than the team parish listed on this form, please have the following completed at your home parish office in compliance with CYO Cheerleading rules.

**Parish Office: Please verify the following:**

\_\_\_\_\_ is a registered parishioner of \_\_\_\_\_

Cheerleader's Name

Parish

as of \_\_\_\_\_

Date

Name of Parish Official

Signature

Phone Number

Date