

*Hough High School presents: Cheerleading Clinic Registration Form*

**CHILD INFORMATION** (ONLY ONE CHILD PER REGISTRATION FORM, PLEASE):

**CHILD'S NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_

**CHILD'S AGE (AT TIME OF CLINIC):** \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_\_ **SEX:** M / F

ANY SPECIAL MEDICAL INFORMATION INSTRUCTORS SHOULD KNOW (INCLUDING ALL KNOWN MEDICATION, FOOD, OR OTHER ALLERGIES AND ALL KNOWN MEDICATION BEING TAKEN. PLEASE NOTE THAT NO MEDICATION CAN OR WILL BE SUPPLIED BY CHEER CLINIC STAFF):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PARENT/GUARDIAN INFORMATION:**

**PARENT/GUARDIAN NAME:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**CELL PHONE:** \_\_\_\_\_ **HOME PHONE:** \_\_\_\_\_

**EMERGENCY CONTACT** (OTHER THAN NAME ABOVE, AUTHORIZED TO PICK UP CHILD OR TO CALL IN AN EMERGENCY). PLEASE NOTE THAT WE WILL ALWAYS CALL PRIMARY PARENT/GUARDIAN FIRST):

**NAME:** \_\_\_\_\_ **DAY PHONE:** \_\_\_\_\_

WAIVER: In consideration of the acceptance of this entry for my child, I hereby waive and release Charlotte Mecklenburg Schools, Hough High School, the sponsors, volunteers, and any other persons associated with this event of all responsibility and liability of any nature whatsoever as it concerns any/all injuries, sickness, or damages incurred from my child's participation. Further, I certify that my child is physically fit and capable of participating in the activities for which he/she has registered. I give my permission for the free and unrestricted use of my child's picture in any telecast, broadcast, or written account of this program. I acknowledge my email address will be used exclusively by Hough High School for the purpose of sharing related information regarding this or other programs and will not be shared with any other parties.

**Parent/Guardian Signature:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\*You are welcome to pay with cash or check. Please make checks payable to **Hough ABC**

**For administrative purposes only:**

Amount: \_\_\_\_\_

Cash: \_\_\_\_\_

Check: # \_\_\_\_\_

(optional) T-shirt size: \_\_\_\_\_