

# Gloucester Township Girls Athletic Association, Inc.

## COMPETITION CHEERLEADING 2018

I hereby grant permission for \_\_\_\_\_ to participate in the cheerleading program under the Rules and Regulations and ByLaws of the Gloucester Township Girls Athletic Association, Inc. I understand there are risks of possible injury in this program. I release the G.T.G.A.A., its officers, members, and sponsors from any legal or financial responsibility resulting from actions of, or injury to, my daughter (while participating in any G.T.G.A.A. activity or event), *AND myself or my family as a coach, official, spectator, or participant at any G.T.G.A.A. activity or event.* It is my understanding that I will use my insurance first if any accident occurs and the league's insurance only if mine does not cover it. Registration fee of \$95 is non-refundable after May 30. **ALL RETURNED CHECKS THIS YEAR SUBJECT TO \$25 FEE.**

BIRTHDATE: \_\_\_\_\_ Age as of May 1, 2018: \_\_\_\_\_ Grade as of NOW: \_\_\_\_\_ Yrs Exper.: \_\_\_\_\_ 17Squad: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Shirt Size: YM YL AS AM AL AXL

Any medical problems: \_\_\_\_\_  
 Parent's Names: (mother) \_\_\_\_\_ (father) \_\_\_\_\_  
 Any Sisters Participating in Program: (name) \_\_\_\_\_ (age) \_\_\_\_\_  
 In Case of Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Player's "bad" days (C.C.D., etc.): \_\_\_\_\_ EMAIL: \_\_\_\_\_ @ \_\_\_\_\_

**Parent Volunteer (circle): Assist Admin Assist Apparel Squad Parent Squad Coord**  
**CAN YOU HELP AT OUR JAN. COMPETITION YES \_\_\_\_\_ NOT AVAILABLE \_\_\_\_\_**

***UNIFORM POLICY - I understand and certify that I will keep my daughter's uniform in neat, clean, and proper condition during the course of the season. Also, no alterations are to be made without the approval of the Squad Coordinator, and that the uniform is to be turned in within one week of the squad's last activity, and in clean condition.***

***ADDITIONAL EXPENSES - I also understand that there will be additional expenses incurred for the program for which I am responsible, such as sneakers, bodysuit, briefs and socks. Adequate notice will be provided when these costs are to be presented.***

***COMMITMENT - I understand this program requires dedication and commitment as the routines are dependent on the full participation of each cheerleader. Registrant must attend all competitions and events. The GTGAA needs to approve any other non-school athletic activity done during the same time as this program, due to insurance compliance and possible time conflicts - prior to certification on a roster.***

***OTHER ANTICIPATED ACTIVITIES DURING CHEER SEASON (Aug-Feb): \_\_\_\_\_***

**In the event of injury, accident or sickness requiring immediate treatment, I request that every effort be made to contact me directly. If I cannot be reached, I authorize the G.T.G.A.A. staff to make appropriate arrangements for treatment.**

\_\_\_\_\_  
 Parent Signature AMOUNT PAID: Registration Fee: \_\_\_\_\_ date \_\_\_\_\_ BY: \_\_\_\_\_  
 Payments/Date: \_\_\_\_\_

**TUMBLING - Does cheerleader have any specific tumbling skills? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_**  
**Any tumble lessons in last 6 months? \_\_\_\_\_ If yes, where? \_\_\_\_\_ Would she be interested in tumble lessons through GTGAA? \_\_\_\_\_**

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**ALL REGISTRANTS MUST ATTEND FIRST NIGHT - Tuesday, May 15 at Highland HS 7:30 PM**  
**AND THE PARENTS REVIEW MEETING AND CLINIC ON THURS., MAY 17 AT HIGHLAND HS GYM AT 7:30 PM**

**DATES FOR CLINICS AND PLACEMENT TRYOUTS (EVERYONE MUST ATTEND ALL DATES):**

(SOFTBALL PLAYERS COME TO GYM AS SOON AS YOU CAN)

*(Squads will be set based on age, grade, and experience. Everyone should be placed on a squad if they attend clinics and reviews and make the effort. Novice squads may be formed, if enough interest. Refunds will be given until May 29).*

Division	Age As of May 1	CLINIC at Highland HS Gym Thurs. May 17 and May 22 FINAL REV and Squads Set - Tues. May 22	Squad Practices at Highland HS Gym May 24, May 29, May 31 June 5, 7
PeeWee	Ages 8-under	7:15-8:15 P.M.	7:15-8:15 P.M.
Youth	Age 10-under	7:45-8:45 P.M.	7:30-8:30 P.M.
Youth/Junior Prep	Age 12-under	7:45-8:45 P.M.	7:45-8:45 P.M.
Junior	Age 14-under	7:45-8:45 P.M.	7:45-8:45 P.M.

**TUMBLING ON FRIDAY EVENINGS (see flyer to follow)**

**MANDATORY SUMMER CLINICS STILL BEING DISCUSSED - Please advise coordinator of any Summer Vacation Plans ASAP.**

**\*\*RAFFLE TICKET FUNDRAISER WILL BE DISTRIBUTED May 29 (due back Aug 14 - 50 \$1 tix)\*\***

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RECEIPT OF PAYMENT BY G.T.G.A.A. (AMOUNT- Reg \$ \_\_\_\_\_ By \_\_\_\_\_)