

Gloucester Township Girls Athletic Association, Inc.

COMPETITION CHEERLEADING 2019

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, 2019: _____ Grade as of NOW: _____ Yrs Exper.: _____ 18Squad: _____
 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

UNIFORM POLICY - I understand and certify that I will keep the 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? _____**

ALL REGISTRANTS MUST ATTEND FIRST NIGHT - Tuesday, May 14 at Highland HS 7:30 PM

Squads will be set based on age and experience. We will make as many squads as registrations allow, also depending on the number of experienced coaches that are available. At this time, we do not have any specific age divisions set.

Age Divisions and Squads will be set by May 23.

If we are unable to accommodate anyone on a squad, refunds will be given by May 30.

ALL CHEERLEADERS NEED TO ATTEND ALL OF THE CLINIC AND PRACTICE DATES:

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

ALL ACTIVITIES HELD AT HIGHLAND HIGH SCHOOL GYM AT THIS TIME

- Tuesday, May 14 7:30-8:30 PM***
- Thursday, May 16 7:30-8:30 PM***
- Tuesday, May 21 7:15-8:30 PM***
- Thursday, May 23 7:15-8:30 PM***
- Tuesday, May 28 7:15-8:30 PM***
- Thursday, May 30 7:15-8:30 PM***
- Tuesday, June 4 7:15-8:30 PM***
- Tuesday, June 11 7:15-8:30 PM***

****RAFFLE TICKET FUNDRAISER WILL BE DISTRIBUTED May 30 (due back Aug 15 - 50 \$1 tix)****

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