LIBERTY PARKS & RECREATION DEPARTMENT

CHEERLEADING

Fee- Free

****Participants will purchase their own uniform****

Ages: 5-12

5 year olds must be in Kindergarten

PLAYER'S NAME*_____ BIRTH DATE* _____

ADDRESS* _____ AGE* _____

GRADE YEAR _____

ZIP* _____ HOME PHONE* _____SEX* _____

SCHOOL PLAYER ATTENDS*_____

PARENT/GUARDIAN*_____ CELL PHONE*_____

PARENT/GUARDIAN_____CELL PHONE _____

EMAIL ADDRESS* _____

I (We) the below-signed certify (1) That the above information is correct; (2) That in consideration and as a condition of the above identified registrant's participation in the above youth sport programs, I agree to indemnify, defend, and hold harmless the Town of Liberty, its agents and employees from and against any and all liability from injury which I or my child may suffer as a result of or in any connection with or arising out of the registrants participation in the above program: and (3) That the responsibility for carrying appropriate medical plans including hospitalization lies with the below-signed parent/guardian.

SIGNATURE OF PARENT/GUARDIAN* _____ DATE* _____

During this sport, your child may be subjected to photography. By signing and turning in this form, you are giving permission

DEAR PARENT: We are always in need of volunteer help. Without volunteers, the program would not be as successful. PLEASE INDICATE BELOW THE POSITION YOU WOULD BE WILLING TO ACCEPT. **We will be doing background checks for all coaches.**

HEAD COACH _____ ASSISTANT COACH_____ NOT INTERESTED_____

Name in Interested Person _____Shirt Size of Coach/Assistant_____

Forms and Payment can be dropped off at the Town Hall drop box, M-F 9am-5pm or Mailed to PO Box 1006, Liberty NC 27298