RUTHERFORD CO. CRIMSON TIDE



2018 FOOTBALL and CHEERLEADING REGISTRATION FORM — FOOTBALL — CHEERLEADING

CHILDS NAME: AS APPEARS ON BIRTH CERTIFICATE	D	ATE OF BIRTH:	AGE ON JULY 31, 2018
DI AVEDIQUEEDI FADED HOME ADDDEGO	OUTV		710
PLAYER/CHEERLEADER HOME ADDRESS	CITY:	, .	ZIP:
[] MALE [] FEMALE () HOME PHONE (include area code)	() CELL PHONE (include area code)	()	(include area code)
поме Рполе (післиве агеа сове)	,		(include area code)
PARENT'S E-MAIL ADDRESS i.e. benjidog@comcast.net:]NO []YES ED PLAYER / CHEERLEADER?	# YRS. EXPERIENCE
TANENT & E-MAIL ADDITESS T.E. Delijilog@collicast.net.	EXI ENIENCE	DI LATENT CHEENELADEN:	# TNO. EXI ENIENCE
SCHOOL ATTENDING IN FALL, 2018 GRADE FO	OR FALL, 2018 WHAT TEAM.	/ COACH DID YOU PLAY / CHE	EER ON LAST YEAR
As a player/cheerleader in the Rutherford Co. Crimson Tide Your sportsmanship and conduct and act to the best of my ability. I wing rades in schoolwork and obey my parents, teachers, and coaches.			
SIGNATURE OF PLAYER or CHEERLEADER		DATE	<u>;</u>
PLAYER / CHEERLEADER LIVES WITH (It is necessary to fill out the information for the parent the child does not live with)] MOTHER [] FATHER []BOTH PARENTS []LI	EGAL GUARDIAN
MOTHER'S / LEGAL GUARDIAN'S INFORMATION	FATHER'S / LEGAL GUARI	DIAN'S INFORMATION	
NAME:	NAME		
ADDRESS			
CITY, STATE, ZIP			
PHONE NUMBER	PHONE NUMBER		
LIST ANY MEDICATIONS CURRENTLY TAKEN BY PLAYER / CHEERLEADER			
LIST ANY MEDICAL and/or PHYSICAL CONDITIONS or ALLERGIES THAT WILL BE IMPORTANT FOR THE COACHES TO KNOW			
PARENTAL AUTHORI. The undersigned parent and/or guardian of the above-named minor Tennessee Youth Football Alliance (TYFA) and agree for said minor I acknowledge that the activities that my child will be involved in those dangers to which my child will be exposed. I specifically acknowledge that the activities that my child will be exposed. I specifically acknowledge to the exposed during TYFA activities including, but not limited to tivities and medical attention of any nature resulting from injuries sure I do hereby WAIVE, RELEASE, ABSOLVE AND AGREE TO INDEM program, it's entire organization, TYFA, the local league/community persons and/or organizations that transport the participants for any propunitive nature and for any and all other claims and/or damages which said activities. The parent/guardian whose signature appears below does hereby which may be deemed necessary by medical care providers attending I further agree and acknowledge that I am responsible for all charnamed minor pursuant to this agreement. In signing this form, I also give this organization, as well as TYF I ACKNOWLEDGE THAT I HAVE FULLY READ THIS COVENANTICE.	or to be assigned by TYFA or The may be dangerous in nature at owledge and understand that for more each, every, and all risks are to, playing said sport, cheerleads taking in the activities. INIFY PAY AND HOLD SAFE And their coaches, participants, Burpose for and from all claims, che might arise out of and/or ductonsent to any and all medical goto the above-named minor for the ges incurred in connection with A, permission to use my child?	participation by the above- ryFA agents a TYFA team and I represent that I know potball/cheerleading is a spand/or hazards to which said ding and/or transportation AND HARMLESS said foo board of Directors, all office injuries, damages of both the to the above-named minutreatments including anes in injuries sustained in the above transportation that are rendered to the protocolograph as a particip	and understand port with risk of d minor or myself to and from all actiball / cheerleading cers, all assistants, a compensatory and or's participation in thesia and operations activities. Ered to the aboveant on either website.
PARENT'S SIGNATURE		DATE	

revised: 03/2018