

Peachtree Ridge Cheer Lions

2013-2014 Try-Out

Emergency Contact Information and Consent Form

Student Name: _____

Student Number: _____ Grade Level (2012-2013 school year) _____

Rank Preference of Squads *(rising 10th, 11th, & 12th graders ONLY)*

_____ VARSITY FOOTBALL

_____ VARSITY BASKETBALL

_____ JV FBALL/BBALL

_____ 9TH GRADE FBALL/BBALL

(all rising 9th graders should check JV or 9th box ONLY)

Parent/Guardian(s): _____

Home Phone: _____

Parent/Guardian Work Phone: _____

Parent/Guardian Cell: _____

Student Cell: _____

Parent/Guardian Email(s): _____

Student Email: _____

Address: _____

I give my daughter/son permission to try-out for cheerleading at Peachtree Ridge. I have read and understand the Cheerleading Contract and understand the requirements and repercussions discussed therein. I understand and agree to the financial and fundraising obligations, as well as the time commitment involved with this sport.

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____