Cheboygan Junior Chiefs Football and Cheerleading Grades 3rd - 8th Registration Form

Participant's Name	s Name Cheer or Football?			
			Grade in Fall	
			Zip	
Mother's/Guardian's Name_				
			Zip	
Day Phone	Cell		 I	
Father's/Guardian's Name				
			Zip	
Day Phone	Cell		il	
Emergency Contact's Name				
Day Phone	Cell			
Physician Name	· · · · · · · · · · · · · · · · · · ·	Phone Numb	er	
Insurance Provider				
Policy Holder's Name		Policy Number	er	
List any allergies				
Has athlete had any serious		injury?		
If yes, please describe				
List medication(s) currently to	aking		 	
		WAIVER		
Junior Chiefs or CJC, and it's office (including attorney fees) which may understand that football and cheer involved during playing, practicing that my athlete's participation in att minor child as a result of accident or reasonably safe for their intended at the premises. Furthermore, I undivideotape, sound clips or otherwise and/or voice of any person who pa	ers, employees and a y arise by reason of are contact sports a and participating. As heletics carries with it or injury. I agree to c use. Once having co derstand Cheboygan e taken during activit rticipates in any prog	agents from and against an participation in any program there are dangers inhered a parent/guardian of a parthis risk. As parent/guardianefully inspect and satisfy inducted the inspection, I are Youth Football retains the ies. Cheboygan Youth Footgram, clinic, class or specifications against the control of the control o	gan Youth Football, also known as Cheboygan ny and all loss, liability charges and expenses am. As a parent/guardian of a participating athlete articipating athlete, I am fully aware and understalian, I hereby consent to emergency treatment of y for myself that the facilities provided are agree to expressly assume the risk of participatine right to use and reproduce photos, film, obtall also retains the right to reproduce the imagal event and use the same for any purpose without my permission to use said likeness.	
Parent/Legal Guardian (F				
Parent/Legal Guardian (S	Signature)			
Date				