



## Grove City Little Eagles Football & Cheerleading 2020 Registration Form

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Participant's Name: \_\_\_\_\_

Participant's Address: \_\_\_\_\_

Circle One: Football Player    Cheerleader    Squad (circle): Bantam    Junior    Senior

T-shirt Size: \_\_\_\_\_    Date of Birth: \_\_\_\_\_    Age as of 7/31/2020: \_\_\_\_\_

### Parental Information

Father's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father's Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Address (if different from above): \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Address (if different from above): \_\_\_\_\_

Does the child reside with both parents (circle)? Yes    No    If no, list which parent: \_\_\_\_\_

### Emergency Contact Person

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to the child: \_\_\_\_\_

Are there any limitations or is there any other important information that we need to know to better coach your child? \_\_\_\_\_

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I, \_\_\_\_\_, certify that all information provided is accurate. I agree to abide by the rules and regulations of the Grove City Little Eagles Football & Cheerleading Organization and hold the organization, its officers, board of directors and coaches, free and harmless of any liabilities that may arise while I or my child/children is/are participating in the club activities. The GCLE has my permission to seek emergency treatment as deemed necessary in my absence.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_