



## ALL COUNTY CONFERENCE CHEERLEADING LEAGUE APPLICATION

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Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**On July 1<sup>st</sup> of the current season,** my child was/will be \_\_\_\_\_ years of age, grade this September \_\_\_\_\_

My child currently resides in the \_\_\_\_\_ School District

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Has your child ever participated in another ACCJF cheerleading organization other than the one you are registering for? Check one, Yes \_\_\_\_\_ No \_\_\_\_\_ if yes, Where \_\_\_\_\_

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Having been informed of the intent of the ALL COUNTY CONFERENCE JUNIOR FOOTBALL LEAGUE (ACCJFL) to provide supervised football games for youth's. I/We the parents of the above, do hereby give my/our approval to his/her participation in any and all activities during the current season. I/we do assume the entire risks and hazards incidental to the conduct of the activity, the transportation to and from the activity; and I/we further release, absolve, indemnify, and hold harmless the ACCJFL, the organizers, sponsors and supervisors appointed by them. I/We hereby waive all claims against the organizers, sponsors, and any supervisors appointed by them. I/We release from responsibility any persons transporting my/our child to and from the activity.

I/We will also return all equipment and uniforms used by my/our child by a specific date set by team officials, or pay for the replacement of same

I/We are in a position to furnish, upon request of conference officials, an original copy of the birth certificate.

### **Complete only if moving a child up a level due to grade**

My daughter/son \_\_\_\_\_ has my permission to move up to \_\_\_\_\_ Team. I confirm she/he is entering \_\_\_\_\_ Grade in September.

I understand She/He cannot be moved back down once She/He is moved up.

Signature \_\_\_\_\_ Date \_\_\_\_\_