ASSOCIATION STAMP

BBPW STAMP

BIG BEND POP WARNER, INC.
P.O. BOX 3345
TALLAHASSEE, FL 32315
BIGBENDPOPWARNER@YAHOO.COM

BIG BEND POP WARNER
YOUTH TACKLE CHEERLEADING REGISTRATION FORM

(ALL INFORMATION MUST BE ACCURATE & COMPLETE - PLEASE PRINT)

CHILD'S NAME: _____ HOME #: ( )_____
LAST MIDDLE FIRST

ADDRESS:_____ CELL#: ( )_____
NUMBER STREET

_____ E-MAIL _____
CITY STATE ZIP

MALE: ____ FEMALE: _____ DATE OF BIRTH:_____/_____/_____ PHYSICAL DATE_____

YEARS OF CHEERLEADING: _____ SQUAD LAST YEAR: _____ AGE ON 7/31/09:_____

DIVISION PERFERRED: _____

SCHOOL IN FALL 2009: _____GRADE IN FALL 2009: _____

HEALTH INSURANCE PROVIDER: _____ GROUP #: _____ POLICY #:_____

FATHER/GUARDIAN (include last name if different):	**MOTHER/GUARDIAN (include last name if different):**
NAME:	NAME:
	DOB(MM/DD) forBBPW only
ADDRESS:	ADDRESS:
CITY & ZIP:	CITY & ZIP:
PHONE:	PHONE:
BUSINESS PHONE:	BUSINESS PHONE:
CELL PHONE:	CELL PHONE:
E-MAIL:	E-MAIL:
VOLUNTEER COMMITMENT: Team Parent Concession Stand Snacks Other _____	**VOLUNTEER COMMITMENT:** Team Parent Concession Stand Snacks Other _____

CASH, CERTIFIED CHECK OR MONEY ORDER ACCEPTED ONLY- NO PERSONAL CHECKS

TO BE COMPLETED BY LEAGUE OFFICIALS:

REGISTRATION DATES: April 11 and 25, 2008 from 9 am to 1 pm at the N. FL Fairgrounds

Cheerleader Registration Fee: $100.00 or $75.00 (sibling) Circle _____ (SIGNED BY LEAGUE OFFICIAL)

Cash_____ Check # _____ Money Order# _____ Date Paid _____ Sponsor another cheerleader/player $_____

PLEASE CIRCLE SIZES BELOW:

Top:	**YS**	**YM**	**YL**	**AX**	**AM**	**AL**	**AXL**	**A2XL**
Bottom:	**YS**	**YM**	**YL**	**AX**	**AM**	**AL**	**AXL**	**A2XL**

COPY OF BIRTH CERTIFICATE EQUIPMENT LIABILITY (signed) MEDICAL HISTORY/PHYSICAL FORM

☐ PARENTAL CODE OF CONDUCT (signed) PARENTAL CONSENT (signed)