



**2018 YOUTH  
CHEERLEADING REGISTRATION**

*Registration Cannot Be Accepted without  
Payment and Age Verification Document for New Participants*

<i>office use only</i>	
Date Received	_____
Amount Paid \$	_____
Check #	_____
Receipt #	_____
50%Scholarship	_____
Approved by	_____

PLEASE PRINT

**Participant's Name:** \_\_\_\_\_ **Gender:**  M  F

**Date of Birth** \_\_\_\_\_ *Verification must be submitted with form for all new participants.*

**REGISTRATION FEE \$37.10 tax included (uniform not included)**

**Scholarship Request:** Limited Number of Partial scholarships is available. To apply for a scholarship proof of income must be provided with registration. Attach a photocopy of: K-CHIP - Kentucky Health Card, K-TAP Card - (Welfare Recipient), EBT Card- (Food Stamp Recipient), Section 8 Public Housing Voucher, or other government assistance program documentation; or Federal tax return.

*NOTE: Scholarship documents must be submitted once every calendar year (January-December). If you have not submitted a qualifying document in 2018, it must accompany this completed registration form.*

**Does this participant require a special accommodation due to a disability in order to fully participate in this program?**

Yes  No If Yes, what type of assistance is needed? \_\_\_\_\_

**List Allergies:** \_\_\_\_\_

**Parent/Legal Guardian Name** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

**Street Address** \_\_\_\_\_ **Work Phone** \_\_\_\_\_ **Ext.** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Emergency Phone** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Emergency Contact if parent/guardian listed above cannot be reached:**

**Name:** \_\_\_\_\_ **Relationship to Participant** \_\_\_\_\_

**Phone** \_\_\_\_\_ Home Work Cell

**MEDICAL CONSENT AGREEMENT AND RELEASE:** I hereby authorize the Lexington-Fayette Urban County Government (its agents, employees, representatives, elected or appointed officials or designees and the agents or employees of its Division of Parks and Recreation, collectively referred to as "LFUCG"), to act for me according to their best judgment in an emergency requiring medical attention for me or my son, daughter, or ward and/or to treat me/my child for any injury/illness that I/he/she sustains during participation in any designated Parks and Recreation activity. I authorize admission to any hospital designated by LFUCG, if advance care (x-rays, tests, etc) is required. It is understood that every reasonable attempt will be made to notify the parent/guardian/named emergency contact of the participant in or to grant any additional authorization for any surgical procedure. Also, I waive and release the LFUCG from any and all liability for any injuries or illnesses incurred while participating in the above activity(s).

I understand that I am responsible for any costs incurred due to injuries received in participating in the above activity(s) covering medical and dental expenses. I further accept responsibility that I and/or my son, daughter or ward, is physically able to participate in the above activity(s).

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*\*cannot accept registration without signature*

**WAIVER AND RELEASE AGREEMENT:**

- (1) I understand and agree that I or my child hereby voluntarily assumes any risk of injury that may arise out of my/his or her participation in the above activity(s) and that the LFUCG assumes no responsibility whatsoever for any injury or damages which may result to me or my child from participation in a Parks and Recreation activity(s).
- (2) In consideration of the entry of me/my child into the Parks and Recreation activity(s), I, intending to be legally bound, do hereby for myself, my heirs, executors, and administrators, do hereby waive, release and forever discharge the LFUCG from any and all claims, demands, damages, or injuries or causes of action whatsoever which may arise as a result of or in connection with, association or entry into in and/or arising out of, traveling to or from, and participation in the activity(s), and I hereby agree to hold the LFUCG harmless for any injury or damages or claims to person or property resulting from the above-mentioned participation.
- (3) I hereby represent that the above participant is in good physical condition and has no disease or injury that would keep the participant from taking part in the activity(s) and I accept responsibility that I and/or my son, daughter or ward, is physically able to participate in the above activity(s).
- (4) I allow the likeness or picture of me/my child to appear in any official documentary, sponsor advertisement or television coverage, whatsoever, of this capacity in any manner incidental to participation in this event/program without compensation to me, my heirs, executors, agents and/or administrators.
- (5) I understand that Parks and Recreation will issue a 50% refund only if a refund request form is submitted 7 business days prior to the start of the activity, except in special circumstances such as medical reasons.
- (6) I understand that, as a participant, parent, and/or spectator, my child and I are responsible to the Division of Parks and Recreation for our actions as related to participation in this sports activity in accordance with the Physical/Verbal Altercation Policy and playing rules. Any unsportsmanlike conduct, including, but not limited to, fighting, verbal abuse or racial and gender epithets involving fans, coaches, or players, will not be tolerated. A copy of the Division of Parks and Recreation Physical/Verbal Altercation Policy and Youth Sports Handbook is available on line or upon request from the Athletic Office.

I hereby assert that I fully understand and agree to these waivers and agreements.

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*\*cannot accept registration without signature*

## 2018 YOUTH CHEERLEADING PROGRAM – CHEERLEADER REGISTRATION

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

Registration Period: June 1 – July 31, 2018

### CHEERLEADING REGISTRATION FEE \$37.10 tax included (uniform not included)

Registration Fee must be submitted with form. Fee is payable to Parks & Recreation by check, money order, credit card, or cash in exact amount. A 50% refund for Cheerleading registration fees can be processed if a written refund request form is submitted to the Athletics Office by August 24, 2018.

Only cheerleaders that have previously cheered for a team may register as returning cheerleaders for that team. All others must register as a new player. Many parks form mixed-age teams that cheer for all age divisions at the park on a rotating basis. Therefore, cheerleaders returning to a mixed-age team may register as a returning cheerleader even if they are changing age divisions. All individuals must register in the appropriate age division. Players who choose to change teams must register as a new player. New players will be automatically assigned after July 31 if a park has registrations that warrant only a single team. Parks with multiple teams will have new players assigned to teams based on roster numbers or requests if possible.

Division eligibility is determined by player's age as of August 1, 2018.

**Select park location and check appropriate age for returning or new cheerleader.**

<b>Constitution Park Titans &amp; Falcons Cheer Team</b>					
<input type="checkbox"/> returning: ages 6, 7, 8	730001	<input type="checkbox"/> returning: ages 9 & 10	730031	<input type="checkbox"/> returning: ages 11 & 12	730061
<input type="checkbox"/> *new: ages 5, 6, 7, 8	730000	<input type="checkbox"/> *new: ages 9 & 10	730030	<input type="checkbox"/> new: ages 11 & 12	730060
<b>Douglass Park Dolphins Cheer Team</b>					
<input type="checkbox"/> returning: ages 6, 7, 8		<input type="checkbox"/> returning: ages 9 & 10		<input type="checkbox"/> returning: ages 11 & 12	
<input type="checkbox"/> *new: ages 5, 6, 7, 8	730002	<input type="checkbox"/> *new: ages 9 & 10	730032	<input type="checkbox"/> new: ages 11 & 12	730062
<b>Gainesway Park P.A.L. Steelers Cheer Team</b>					
<input type="checkbox"/> returning: ages 6, 7, 8	730005	<input type="checkbox"/> returning: ages 9 & 10	730035	<input type="checkbox"/> returning: ages 11 & 12	730065
<input type="checkbox"/> *new: ages 5, 6, 7, 8	730004	<input type="checkbox"/> *new: ages 9 & 10	730034	<input type="checkbox"/> new: ages 11 & 12	730064
<b>Idle Hour Park Ravens Cheer Teams</b>					
<input type="checkbox"/> returning: ages 6, 7, 8		<input type="checkbox"/> returning: ages 9 & 10		<input type="checkbox"/> returning: ages 11 & 12	730006
<input type="checkbox"/> *new: ages 5, 6, 7, 8	730006	<input type="checkbox"/> *new: ages 9 & 10	730036	<input type="checkbox"/> *new: ages 11 & 12	730066
<b>Martin Luther King Park Broncos &amp; Ducks Cheer Team</b>					
<input type="checkbox"/> returning: ages 6, 7, 8	730010	<input type="checkbox"/> returning: ages 9 & 10	730041	<input type="checkbox"/> returning: ages 11 & 12	730069
<input type="checkbox"/> *new: ages 5, 6, 7, 8	730009	<input type="checkbox"/> *new: ages 9 & 10	730040	<input type="checkbox"/> new: ages 11 & 12	730068
<b>Shillito Park Cheer Team</b>					
<input type="checkbox"/> returning: ages 6, 7, 8	730012	<input type="checkbox"/> returning: ages 9 & 10	730043	<input type="checkbox"/> returning: ages 11 & 12	730071
<input type="checkbox"/> *new: ages 5, 6, 7, 8	730011	<input type="checkbox"/> *new: ages 9 & 10	730042	<input type="checkbox"/> new: ages 11 & 12	730070
<b>Southland Park Cheer Team</b>					
<input type="checkbox"/> returning: ages 6, 7, 8	730017	<input type="checkbox"/> returning: ages 9 & 10	730048	<input type="checkbox"/> returning: ages 11 & 12	730074
<input type="checkbox"/> *new: ages 5, 6, 7, 8	730016	<input type="checkbox"/> *new: ages 9 & 10	730047	<input type="checkbox"/> new: ages 11 & 12	730073

**\*New Cheerleader Request-** If there is more than 1 team at a park and a cheerleader has a family member on a cheerleading team or football team; new cheerleaders may request that team. We cannot guarantee requests. Individuals will be contacted if a request cannot be accommodated. Team Name \_\_\_\_\_ Reason for request \_\_\_\_\_

- family member is returning participant on this cheerleading or football team  
 parent or family member is coach of this cheerleading or football team  
 other \_\_\_\_\_

★ We depend on the support of parents and volunteers who serve as coaches and team parents to provide the best program possible for our youth. Please consider coaching or assisting with a team. All coaches complete an application that includes a background check. Coaches receive pre-season sports-specific training and support through the season. Every minute working with a child becomes a lifelong memory that is well worth your time. You can find an application online or check a box below to be contacted at a later date.

Head Coach  
  Asst Coach  
  Team Parent  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_