



East Limestone Athletic Association
Cheerleader Signup Form

Child's First Name Last Name

Date of Birth School Child Attends?

(Please specify whether Adult/Child sizes) Jersey Size: Short Size: Shoe Size:

Address

Mom's Name Dad's Name

Mom's Email Dad's Email

Mom's Primary Phone Dad's Primary Phone

Mom's Secondary Phone Dad's Secondary Phone

Special Requests*:

Practice Limitations*:

As a parent or guardian, would you be willing to Coach or Assist?

Are there any medical conditions that the Coaches of ELAA need to be aware of? Yes No

If yes, please explain:

*Special Requests and Practice Limitations are taken into consideration. ELAA cannot guarantee that your request will be satisfied.

My signature below certifies that I am the parent or legal guardian of (Child's Name)

In consideration of participation in the ELAA youth basketball/cheerleading program, we hereby waive and release any and all claims for damages we may have or that my child may have against members of the ELAA, and/or the Limestone County School system. It will be the responsibility of the parent(s) and or guardian(s) to fulfill concession stand duty or field work day duty when asked by the coach. Parents WILL be asked to work at least once during the season. Parent(s) and or guardian(s) must understand that failure to do this could result in repercussions in which may include loss of innings played on the child's behalf.

This agreement is executed on (Date), by the parent(s) or guardian(s) of the above stated child.

Parent(s)/Guardian(s) Signature

DO NOT WRITE BELOW THIS LINE

Payment method: Cash Check # Amount Paid Number Cheerleaders paid for?

Fundraiser paid for?

Date

ELAA Officer