

Culpeper Blue Angels  
2008 - 2009 CBA Cheerleading and Dance  
**REGISTRATION & WAIVER FORM**

CBA Staff use only:  
Squad: \_\_\_\_\_

**Cheerleader info:**

Cheerleader: \_\_\_\_\_ Copy of Birth Certificate: \_\_\_\_\_  
(for competition teams ONLY)  
Date of Birth: \_\_\_\_\_ Age as of 5/31/08: \_\_\_\_\_  
Grade as of **upcoming** school year (2008-2009): \_\_\_\_\_ School: \_\_\_\_\_  
Please list any allergies and/or other medical conditions (i.e., asthma) that CBA should be aware of: \_\_\_\_\_  
\_\_\_\_\_  
Primary Physician: \_\_\_\_\_  
Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

**For updates/changes/emergencies:**

Contact name: \_\_\_\_\_ Relation to child: \_\_\_\_\_ Contact #: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City and Zip: \_\_\_\_\_  
Contact Email Address: \_\_\_\_\_ Cellphone # (if different from contact #): \_\_\_\_\_

**Parent (responsible party) info:**

Parent/Guardian Responsible: \_\_\_\_\_ Home #: \_\_\_\_\_  
Other Parent/Guardian if necessary: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Work address and/or email address: \_\_\_\_\_ Work #: \_\_\_\_\_  
Parent Cell phone #: \_\_\_\_\_ Other # or Email: \_\_\_\_\_

- I give CBA permission to use the information above to distribute among CBA cheerleaders, staff, and competitions when needed.
- I give CBA permission to use any pertinent information and/or pictures of my child on the CBA website and other media such as television and newspapers.
- Explanation of why you do not give CBA permission of the above: \_\_\_\_\_  
\_\_\_\_\_

I understand the financial obligations of the competition squads and if they are not fulfilled or agreeable arrangements have not been made, my child will be removed from the cheerleading program without reimbursement of prior costs/payments. I understand that no reimbursements are given once monies have been paid on your child's account including prorating. Once my child is removed, I am fully aware that the outstanding costs on my child's account must be paid (payback plan not to exceed four consecutive months from time of removal).

I understand that cheerleading, like most sports, does involve some risk or injury; yet, I will not hold the CBA Staff or the practice facilities responsible or liable for any injury that may occur while at practice or any CBA related event. I also give CBA permission to seek medical attention for my child in the event of an emergency.

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

CBA squad(s) will be determined by age and skill levels.

Web: \_\_\_\_\_

**CBA STAFF USE ONLY:**

Competition teams Registration: \$85(new) \$45(returning from last season) & First monthly fee of \$ \_\_\_\_\_  
**Total amt. Paid \$** \_\_\_\_\_ Cash Check# \_\_\_\_\_

Prep teams \$20 Registration & First monthly fee **Total amt. Paid \$** \_\_\_\_\_ Cash Check# \_\_\_\_\_

Cheer \$100/mo  Dance \$65/mo  2 squads \$150/mo  Prep \$65/mo  Sibling: Cheer \$50/mo Dance/Prep \$32.50/mo