



**Cherokee County YMCA**  
Winter 2009

# Cheerleading

Registration September 22 — November 9

**Office Use Only**

Date \_\_\_\_\_  
HID \_\_\_\_\_  
Staff \_\_\_\_\_

**Player Info**

FIRST Name \_\_\_\_\_ LAST Name: \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ DOB \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Age \_\_\_\_\_ Seasons Played 0 1 2 3+

Email: \_\_\_\_\_ (for confirmation only)

Mom \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Dad \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Cheer Shirt Size** (Circle) YXS YS YM YL AS AM AL **Skort Size** (Circle) YS YM YL AXS AS AM

("Y" indicates youth sizes, "A" indicates adult sizes, if in doubt, order larger size!!)

**Return/Fax this form** to the G. Cecil Pruett YMCA — 151 Waleska St — Canton, GA 30114  
Phone 770-345-9622 Fax 770-345-5290

**Registration Fees**

	<b>Facility Member</b>	<b>*Program Member</b>
<b>Cheer League</b>	\$65	*\$85
<b>Uniform Fee</b>	\$25	*\$25

**Includes t-shirt, skort, & pom poms. Due at time of registration**

**YMCA Membership Fees**

You must be a member of the YMCA to participate in any Program

**\*Program Membership** \$35 annually

**Special Requests**

Please note we will do our best to meet your request but they are not always guaranteed.

Coach Request \_\_\_\_\_

Player Request \_\_\_\_\_

Days you **CANNOT** practice M T W TH F

Practice Location (Circle one) Canton YMCA or Cherokee Outdoor YMCA

**Volunteer Opportunities**

Get involved and help make a difference at your YMCA!

**Circle one of the following**

**Head Coach**

(organize team, conduct practices, attend games)

**Assistant Coach**

(assist head coach with preparation and play)

**Shirt Size:** S M L XL XXL

**Preferred Practice Day**

(Circle at least 2 choices)

M T W TH F

**Are you?** Dad Mom Other

**Email:** \_\_\_\_\_

**Credit Card Agreement**

Registration Fee \$ \_\_\_\_\_ Membership \$ \_\_\_\_\_ **Grand Total \$** \_\_\_\_\_

**Credit Card Information:**

Name on Card (Print) \_\_\_\_\_

Type of Card (Circle One) MasterCard Visa Discover Amex

Card Numbers: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ exp: \_\_\_\_\_ / \_\_\_\_\_

- ◆ I authorize the YMCA to charge my credit card for the above amount.
- ◆ I understand that if my card declines my child(ren) spot will not be reserved until full payment is made.

Card Holders Signature \_\_\_\_\_ Date \_\_\_\_\_