

**TRACIE'S ALL-STAR  
TUMBLING & CHEERLEADING**

**ROCK CO. ALL-STAR REGISTRATION FORM**

Participant's Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

**Are you currently cheering for your school? Yes No**

**Tumbling Experience: Standing Back Handspring Round Off Back Handspring**

**Other:** \_\_\_\_\_

**Experience (cheer, dance, tumbling)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I am aware that there is a \$10 try out fee due April 20, 2007 and that this fee is NON Refundable**

I acknowledge and understand the risks involved in this activity and grant permission for my child to attend and assume all those risks. Above participants has elected to take part in certain recreational activities. In consideration for and as a condition of such participation, participant agrees to hold TRACIE'S ALL-STAR TUMBLING & CHEERLEADING and its instructors, staff, and employees, harmless from all suits, claims, and demands of every kind arising out of or in connection with the undersigned as a participant in said recreational program. Participant further releases TRACIE'S TUMBLING & CHEERLEADING and it's instructors, staff, and employees from all suits, claims and demands of every kind and character which participant or participant's successors or assigns shall or may have arising out of or by reason of or in connection with the course of instruction and activities contemplated in the program. It is understood that the participation in this activity could result in serious injury and/or death. It is declared that said participant is physically fit to participate in the program and is physically fit to participate in the program and is in good physical condition.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_