

JAGUAR ATHLETICS 2019 - 2020 REGISTRATION FORM

First Name: **Last Name:**

DOB: Age as of December 31, 2020:

Address:

Home Ph: Mobile:

Athlete's Email:

Parent/Guardian Details 1: *(First point of contact for emergencies)*

Name:

Relationship:..... Email:

Address:

Home Ph:..... Mobile:.....

Parent/Guardian Details 2:

Name:

Relationship:..... Email:

Address:

Home Ph:..... Mobile:.....

Emergency Contact other than Parent/Guardian:

Name:

Relationship:..... Email:

Address:

Home Ph:..... Mobile:.....

Experience: Check all that apply.

Have you done cheerleading: YES or NO Which Kind: REC / ALLSTAR / SCHOOL

Level(s):..... How Long:

How did you hear about Jaguar Athletics Cheer?