

**Farmington Competition Cheer Teams 2019-2020  
Medical Release/Emergency Contacts**

**Athlete Name** \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Grade 2019-20 \_\_\_\_\_ School 2019-20 \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ Zip \_\_\_\_\_  
 Home \_\_\_\_\_ Cell \_\_\_\_\_  
 Athlete Email \_\_\_\_\_

**Parent Name** \_\_\_\_\_ Relationship to Athlete \_\_\_\_\_  
 Cell \_\_\_\_\_ Email \_\_\_\_\_

**Parent Name** \_\_\_\_\_ Relationship to Athlete \_\_\_\_\_  
 Cell \_\_\_\_\_ Email \_\_\_\_\_

**Emergency Contact (not a parent)**

Name \_\_\_\_\_  
 Home \_\_\_\_\_ Cell \_\_\_\_\_

Medical Conditions \_\_\_\_\_  
 Asthma \_\_\_\_\_ Inhaler – YES / NO \_\_\_\_\_  
 Allergies \_\_\_\_\_ Epi Pen – YES / NO \_\_\_\_\_  
 Current Medications \_\_\_\_\_  
 Is there anything else we may need to know? \_\_\_\_\_

**Varsity & Junior Varsity Teams Only**

I understand the financial and travel obligations associated with these teams. YES \_\_\_ NO \_\_\_

**Middle School Only**

I understand that the Middle School team has extra competition expenses. YES \_\_\_ NO \_\_\_

**Elementary Teams Only**

I give permission for my child to be considered for the Elem. Orange team.  
 I understand that it requires additional events and an extra fee. YES \_\_\_ NO \_\_\_

I give the following people permission to sign in/out my athlete at competitions:

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

**Please indicate the following:**

My athletes picture and/or first name CAN \_\_\_ CANNOT \_\_\_ be used in Community Education, FCCT and/or FCCT Booster Club promotional, digital/print marketing, social media, website, etc. publications.

My contact information CAN \_\_\_ CANNOT \_\_\_ be shared with the Booster Club in order receive information on upcoming events, fundraisers, etc.

\_\_\_\_\_

We have read and understand the Farmington Competition Cheer Teams Policies. We will follow all rules and policies.

I certify that the athlete is MSHSL eligible (Varsity & JV only) and physically capable to cheer on a Farmington Competition Cheer Team during the 2019-2020 school year starting Spring 2019 and not ending until February 2020.

Signature of Cheerleader \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_