

Reading Recreation Commission 320 South 3rd Street Reading Pa 19602 610-655-6067 seth.sechrist@readingpa.gov

Fall Registration – Cheerleading (complete both sides of form)

Player Information			
Child's Name: First	Last		DOB:
Mailing address:			
	Street	City	Zip
Home Phone #:	Mobile Phone #	Other	r Phone #:
School in Fall 2024:	Grade in F	all 2024:	Age:
**Does the participant have	e any special needs/health issues	(included allergies):	
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Parent/Guardian Information	<mark>on</mark>		
Parent's Name: First	Last		
Mailing address:			
	Street	City	Zip
Home Phone #:	Mobile Phone #		Other Phone #:
Primary Email Address:			
Emergency Contact Informa	ation:	Mob	ile Phone #
	<mark>egistering for:</mark>		
(✓) Program that you are re	egistering for: neerleading (ages 5-12)	(\$100.00*)	Must be 5-12 on or before June 30th
(✓) Program that you are re	neerleading (ages 5-12) Age requirements: 5-12 y	ears of age on or before	June 30
(√) Program that you are re	Age requirements: 5-12 your Payments due at registration	rears of age on or before \$\frac{35.00}{\$35.00}\$\$ buyout/fundraise	June 30
(√) Program that you are re	Age requirements: 5-12 your Payments due at registration	rears of age on or before \$\frac{35.00}{\$35.00}\$\$ buyout/fundraise	June 30 <mark>er per family</mark>
(✓) Program that you are re	Age requirements: 5-12 your Payments due at registration	rears of age on or before \$\frac{35.00}{\$35.00}\$\$ buyout/fundraise	June 30 <mark>er per family</mark>

Player Information
Child's Name: First Last
Emergency Information
Participant has the following handicaps, injuries, allergies
In event of injury to my child/our children, I/We grant authority to any qualified physician to render such medical treatment as said physician deems necessary under the circumstances (initial)
Agreement, Release, and Waiver for Minor
In consideration for being permitted by the Reading Recreation Commission ("RRC") to participate in the Cheerleading Program, I, the LINDERSIGNED, certify that I have legal custody or am the natural or appointed guardian of said minor, and I agree to be

bound by the following: 1. Participation in Program: The football program provides a variety of activities including, but not limited to, physical activities, and active games. Some hazards associated with these activities include but not limited to, injuries associated with playing equipment, concussions, sun burns, heat exhaustion, insect bites, bee stings, and minor injuries associated with game equipment and various other supplies and materials. 2. Medical Attention: I hereby give my consent that in the event I require medical treatment while under the supervision of RRC's personnel in connection with the above described activity, such personnel may authorize treatment that he or she deems necessary. I also agree to pay all medical, hospital or other expenses which may incur as a result. 4. Waiver, Release and Indemnification: I hereby waive, release and discharge any and all claims in advance against RRC (including its directors, officers, employees and agents) from and against any and all liability arising out of or connected in any way with my participation in the above described activities, even though that liability may arise out of negligence or carelessness on the part of RRC (or its directors, officers, employees or agents) for damage for personal injury, death or property damage which I may have or which may hereafter accrue as a result of participation in said activity. It is understood and agreed that this waiver, release and assumption of risks is to be binding on the heirs and assigns the undersigned. I further agree to reimburse or make good any loss or damage or cost that RRC (or its directors, officers, employees or agents) may have to pay if any litigation arises on account of any claim made by anyone on my behalf. 5. Promotion: I hereby give consent to the Reading Recreation Commission to photograph. I understand the picture may be included in program promotional materials, and/or in the promotion of RRC's Cheerleading Program in the newspaper, slide shows or other media. Any use of pictures of football participants are for RRC's charitable purposes only. COVID-19: We believe it is important for you to understand and acknowledge the following. An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. According to the Centers for Disease Control and Prevention, senior citizens and individuals with underlying medical conditions are especially vulnerable. By having you or your child participate in the activities of the Reading Recreation Commission, you and your child are hereby acknowledging and assuming all risks related to exposure to COIVD-19, including the risk that you or your child will become a carrier of COVID-19 and expose others as a result. 5. All issued uniforms and equipment MUST be returned at end of season or a penalty of \$250.00 will be charged to the parent/guardian of player.

I have carefully read this Waiver or Liability, Medical Release and Indemnification Agreement and fully understand its contents. I am aware that this is a release of Liability and a contract between myself and the Reading Recreation Commission.

SIGNATURE OF PARENT/GUARDIAN:	DATE: / /