



## SESO Cheerleader Information Application Form 2011-2012

Name \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ DOB \_\_\_\_\_

Home Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Mother's Name \_\_\_\_\_

Place of work \_\_\_\_\_ Occupation \_\_\_\_\_

Work Phone # \_\_\_\_\_ Cel. # \_\_\_\_\_

Father's Name \_\_\_\_\_

Place of Work \_\_\_\_\_ Occupation \_\_\_\_\_

Work Phone # \_\_\_\_\_ Cel. # \_\_\_\_\_

In an **emergency**, if the parents cannot be reached, notify:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Please include with this application the following:

\_\_\_\_\_ Copy of Medical Insurance Card (both sides)

\_\_\_\_\_ Copy of Birth Certificate

\_\_\_\_\_ 2 photos (2x2)

\_\_\_\_\_ Athletic Department Emergency information and parent consent

\_\_\_\_\_ Cheerleader Rules document, and Information document, **signed**