



GARDEN CITY COUGAR 2020 REGISTRATION FORM



Please check one:
_____ Football _____ Cheer

Please check one:
_____ Returning _____ Sibling _____ New

Participant Name _____
Last First Middle Initial

Date of Birth ____/____/____ Player Age on 8/31/20 ____
month day year

School in Fall 2020 _____ Grade in Fall 2020 _____ Weight (football only) _____

Emergency Contact: _____ Phone: _____

Family Doctor: _____ Phone: _____ Preferred Hospital: _____

Please list any special concerns or comments:

Primary Guardian _____ Email _____

Address _____
Street City Zip Code

Phone H : (____) _____ W : (____) _____ C : (____) _____

Secondary Guardian _____ Email _____

Address _____
Street City Zip Code

Phone H : (____) _____ W : (____) _____ C : (____) _____

APPROVAL AND CERTIFICATION: I certify that all above information is true.

DATE: _____ PARENT OR GUARDIAN SIGNATURE _____

All Payments are NON-REFUNDABLE- NO EXCEPTIONS

Please complete and mail the following to the address listed below. Your registration will not be considered complete until all forms and payments are received. (checks payable to GCYAA)

- Completed registration form (ALL)
- Birth certificate (COPY) - ALL
- Volunteer Check (ALL)
- Equipment Check (FOOTBALL)
- Heads up Concussion (ALL)
- Signed Attendance/Discipline (FOOTBALL) / Cheer Attendance Policy (CHEER)
- Signed parent/player contract (Code of Conduct) - ALL
- Registration fee: Football Flag: \$100 Football all other levels: \$200, Cheer \$75.00
- Physical form is due before 1st practice (ALL) (Dated after April 15, 2020)
- Volunteer Policy Contract (ALL)

Mail to: **GCYAA**
P.O. Box 888
Garden City, MI 48136

<p>(For League use only) Amount Paid: _____ Date: _____</p> <p>Cash _____ Check # _____ MO# _____ Online _____</p>
