



FOR OFFICE USE ONLY

Team Division _____	
<input type="checkbox"/> Football	<input type="checkbox"/> Weight
<input type="checkbox"/> Cheerleading	<input type="checkbox"/> Birth Cert.
<input type="checkbox"/> Returning	<input type="checkbox"/> Medical Info
<input type="checkbox"/> First Year	<input type="checkbox"/> Payment:
	Check#:
	Amount:
	<input type="checkbox"/> Physician Signature
	<input type="checkbox"/> Parent Signature

First Name: _____ Last Name _____

Date of Birth: _____ Age as of 07/31: _____

Address: _____

City: _____ ST _____ Zip _____

Mother's Name: _____ Father's Name: _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

Email Address: _____ Email Address: _____

Emergency Contact: _____ Phone: _____
(someone we can contact during practice/game times)

School: _____ Grade: _____
(name of school and town location)

Insurance Carrier: _____ ID #: _____

I hereby give permission for my child, _____ to participate in the Somerset Hills Mountaineers Football/Cheerleading Program, under the guidance and supervision of the Somerset Hills Mountaineers, Inc. I will hold all coaches, managers, volunteer workers and the association harmless for any liability for injuries to my child. If not present in the event of an injury to my child, I give permission for my child to be medically treated.

Parent/Guardian Signature: _____ Date: _____

Important: Return completed and signed registration (all copies) on Equipment Pick-Up day. Make a copy of this registration form for your records.

Media/Directory Permission Slip

I hereby give permission for my child, _____ to appear on Patriot Media Cable, BHSTV, RHSTV, or other local cable channels, on videotape or pictures of games played (on flyers, Game Program, etc.) while in the Somerset Hills Mountaineers football/cheerleading program. Somerset Hills Mountaineers are not responsible for the filming or broadcast itself, or any other program appearing on these channels.

Parent/Guardian Signature: _____ Date: _____