

# Midlothian Athletic Association Registration Cheerleading

## Player Information:

Name: \_\_\_\_\_  
(Last, First, Initial)

Address: \_\_\_\_\_  
(Street, City, Zip)

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Elementary School District that you **reside** in: \_\_\_\_\_  
(Chesterfield Quarterback League uses elementary school boundaries to form association boundaries)

Grade: (as of Sept) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ (Football – As of Aug 1<sup>st</sup>)

Has your child participated in any MAA program before? Yes No

I would like to volunteer to:

Coach

Team Mom/Dad

Homecoming Committee Head

Asst. Coach

Homecoming Committee

---

## Consent to Play:

I/We the parents of \_\_\_\_\_, hereby give my/our approval to his/her participation in any and all activities of the Football Program of the MIDLOTHIAN ATHLETIC ASSOCIATION. I/We assume all risks and hazards incidental to such participation including transportation to and from activities; and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the MIDLOTHIAN ATHLETIC ASSOCIATION, THE CHESTERFIELD QUARTERBACK LEAGUE, AND THE CHESTERFIELD CHEERLEADING LEAGUE, the organizers, sponsors, supervisors, participants, and persons transporting my/our youth to and from activities, for any claim arising out of an injury to my/our youth whether the result of negligence or any other cause, except to the extent and in the amount covered by accident or liability insurance.

I/We agree to return, upon request, any equipment issued to my child in as good condition as when received. I/We shall furnish a copy of a certified Birth Certificate as requested. I/We understand that no equipment will be issued until registration fees have been paid or payment arrangements made. The \$20 family discount is offered until June 15. Any check that is returned by any financial institution is subject to a \$25 service charge. I/We understand no requests for refunds of registration fees will be considered after the first game. Equipment deposits will be returned at the end of the season after equipment has been returned. Parents will be expected to commit to coverage of a one (1) hour time slot in the various volunteer opportunities during the season.

*If you are unable to pay the sport registration fee, please contact the program director to discuss alternative payment arrangements. All requests must be approved by the Midlothian Athletic Association Board of Directors prior to the start of the season.*

*PERMISSION FOR USE OF PHOTOGRAPH: Permission is granted to use my daughter's/son's picture in future advertisement (to include Facebook MAA page) and literature for Midlothian Athletic Association events sponsored and conducted by them.*

Yes No

Father: \_\_\_\_\_ Date: \_\_\_\_\_

Mother: \_\_\_\_\_ Date: \_\_\_\_\_

---

**Staff Only** Season \_\_\_\_\_ # of Players \_\_\_\_\_

CQL/CCL Forms Birth Certificate