**BRIGADE DRILLTEAM REGISTRATION FORM 2010-11**
**REGISTRATION FEE $65**

**CHILD INFORMATION**

Name: _____
First MI Last

Home Address: _____

_____
City State Zip

Home Phone: _____ School Name: _____

Age: _____ Date of Birth: _____

Has your child ever participated in a Drill Team before? ☐Yes ☐No

Team Name: _____ How Long? _____

**PARENT/GUARDIAN INFORMATION**

Name: _____
First Last

Phone: _____
Work Cell

Email Address (optional): _____

**Emergency Contact:** _____
Name Phone

I hereby give my permission for the above named child to participate in the Brigade Drill Team and all of their activities unless otherwise noted for the 2010-11 season. I give consent to the Brigade Drill Team & Step Squad to photograph my child for promotional purposes that benefit the Brigade Drill Team & Step Squad. All photos taken by Brigade Drill Team and its staff, is the sole property of the Brigade Drill Team and Step Squad. These photos may be used for related advertising as well as the Brigade Drill Team & Step Squad website.
I assume all risks and hereby release, absolve, and hold harmless the Brigade Drill Team, its instructors, and other volunteers from any and all liability, and damages as a result of the Brigade Drill Team's activities. In case of injury to my child, I waive all claims on behalf of my child, myself, and my child's other parent or representatives. I will arrange and assume all responsibility for my child's transportation to and from all activities. I recognize fees are non-refundable. I have read and understand the rules and regulations. I also allow Brigade Drill Team Staff to authorize minor medical treatment for my child.

_____
Parent/Guardian Signature Date

_____

**Official Use Only Do Not Mark Below This Line**

Registration Fee Paid?
□ YES □ Waived □ Delayed Payment
□ NO □ Sibling Discount/Fee Amt $_____ Date Paid _____

Practice Location: _____