



Grant Jr. Bulldogs Football & Cheerleading

Welcome to the 2010 Season,

This packet includes all of the forms you may need to complete the registration process for 2010.

Enclosed you will find:

***Cheerleading Registration Form
Standards of Conduct for Athletes
Authorization to treat a minor form***

Medical release Form *(Only needed if you indicate Yes on any of the medical question on the Registration)*

IHSA Sports Physical Form *(Only needed if you are doing a medical release. This is a separate form you will need to download)*

Payment Plans are available at registration, but register early as this will give you the best options.

Visa, Master Card & Discover all accepted. *(Convenience charges may apply)*

Should you have any questions on completion of these forms, please contact us:

Director of Registration: Michelle Tregenza (847) 587-7484 or mtregenza@grantjrbulldogs.com
Executive Secretary: Dennis Whiton (847) 366-6386 or drwhiton@grantjrbulldogs.com



Grant Jr. Bulldogs Football & Cheerleading

2010 CHEERLEADING REGISTRATION 2010

Participants Name: _____

Address: _____

City/State/Zip: _____

Home Phone #: _____ Cell Phone #: _____

Do you have any previous cheer experience? Yes No

If Yes, how much: _____

What program would you like to be in this year: POMS or CHEER (circle One)
(This is for us to know what you like to do, but we cannot guarantee placement as it will depend on how many sign up)

Birth Date: _____ Current Age: _____

Grade child will be entering in September 2010: _____

Does your child suffer from Asthma or a respiratory condition? Yes No
Does your child have life threatening Allergic Reactions to Bee Stings? Yes No

Does your child have any other conditions that may limit his/her ability to participate? Yes No

If "yes", please explain: (also see Emergency Information on next page & you may need to have your doctor complete a Medical Release)

BELOW INFORMATION MUST BE COMPLETED IN FULL

Father: _____ Mother: _____

Home Phone: _____ Home Phone: _____

Work/Cell Phone: _____ Work/Cell Phone: _____

Email Address: _____ Email Address: _____

Emergency Contact: _____ Relationship: _____
Phone #: _____ Alternate #: _____

Primary Care Physician: _____ Phone: _____
Insurance Company: _____ Group #: _____ Policy #: _____

Do you have any children in the Football Program: Yes No

If "yes", what is the child's name(s): _____ Team: _____

EMERGENCY INFORMATION



Grant Jr. Bulldogs Football & Cheerleading

ANY MEDICATIONS YOUR CHILD MAY NEED TO TAKE FOR ANY REASON MUST BE ADMINISTERED BY THE CHILDS PARENT/GUARDIAN. IF YOUR CHILD REQUIRES AN INHALER DUE TO ASTHMA/RESPIRATORY CONDITIONS YOU MUST SUPPLY US WITH THE FOLLOWING:

- AN INHALER/PRESCRIPTION WITH YOUR CHILDS NAME AS WELL AS FREQUENCY, IN ITS ORIGINAL PACKAGING WITH DOCTORS NOTE INDICATING THAT THE INHALER/PRESCRIPTION HAS BEEN SPECIFICALLY PRESCRIBED FOR YOUR CHILDS USE ONLY.

IF YOU'RE CHILD HAS LIFE THREATENING ALLERGIC REACTIONS AND REQUIRES THE USE OF BENADRYL/EPI PEN, YOUR CHILD MUST SUPPLY US WITH THE FOLLOWING:

- AN UNOPENED BOTTLE OF BENADRYL, PRESCRIBED MEDICATION, OR EPI-PEN WITH YOUR CHILDS NAME ON IT WITH CLEAR WRITTEN DIRECTIONS INCLUDING AMOUNT AS WELL AS FREQUENCY, IN ITS ORIGINAL PACKAGING AS WELL AS A DOCTORS NOTE INDICATING THAT THE PRESCRIPTION/EPI-PEN HAS BEEN SPECIFICALLY PRESCRIBED FOR YOUR CHILDS USE ONLY.

If your child has or requires any of the above please notify the official completing your registration. You will need to complete a release form, which must be filled out by your child's physician BEFORE your child's first day of practice.

HOLD HARMLESS AGREEMENT

I/We the parent(s) or legal guardian(s) of the below named participant in the Grant Jr. Bulldogs Cheerleading Program, hereby give my/our approval to participate in any and all Grant Jr. Bulldogs activities, including transportation to and from the activities.

I/We understand that my/our child/ward or I/We may be photographed or videotaped while participating in the Grant Jr. Bulldogs Program. I/we give permission for photos and videotapes of my/our child/ward or us to promote the Bulldogs Program. Such photos and videotapes will remain the property of the grant Jr. Bulldogs or its agents.

I/We agree to return upon request the uniform and other equipment issued to my/our child in as good a condition as when received except for normal wear and tear. I/We also acknowledge receipt of and agree to the terms of the player and parent codes of conduct.

I/We know that participation in cheerleading may result in serious injuries and protective equipment does not prevent all injuries to participants, and so I/We hereby waive, release, absolve, indemnify and agree to hold harmless the Grant jr. Bulldogs Booster Club, it's officers, directors, coaches and participants from any and all claims of medical, surgical and nursing care that may be incurred as a result of participation in the Grant Jr. Bulldogs Cheerleading Program.

Participants Name: _____

Parent(s) or Guardian(s) Signatures: _____

Date: _____

Witness: _____

STANDARDS OF CONDUCT FOR ATHLETES - 2010



Grant Jr. Bulldogs Football & Cheerleading

The Grant Jr. Bulldogs have established the following standards of conduct for all athletes. Athletes are expected to conduct themselves in a responsible, respectable manner both on the field and in the community. Incorporated in the standards are the means by which they will be measured and corrective action taken in the event of violation.

Attendance at Games, Practices and Weigh-Ins

- All Athletes are expected to attend all scheduled practices and games.
- Football Players missing more than 25% of practices prior to the first game will not be eligible to participate in that game.
- Athletes missing more than one of the weekly scheduled practices after the first League game will see limited playing/cheerleading time during the next game.
- Athletes missing all of the weekly scheduled practices may not participate in the next game.
- Athletes unable to attend practice are responsible for notifying one of their coaches prior to practice.
- All Cheerleaders are expected to follow established cheerleading attendance policy to be eligible to participate in Competitions.
- Cheerleaders who miss more than three scheduled practices or performances after September 6, 2010 may be ineligible to participate in Competitions. See Cheerleading Handbook for details.
- All Football Players must attend scheduled weigh-ins in order to play in each game.

Conduct on and off the field

Athletes shall not:

- Criticize teammates, league participants, officials, coaches and parents. The first confirmed incident would result in coaches' counseling and parent notification. A second confirmed incident will result in a warning, extra laps, and parent notification. A third confirmed incident would result in a one game suspension. Any subsequent incidents will result in progressive disciplinary measures up to and including dismissal from the program.
- Use profanity while on or around any practice or game facility. Initial violations will result in a warning, extra laps, and parent notification of the incident. A second violation will result in a one game suspension, and a third violation may result in additional disciplinary action up to and including dismissal from the program.
- Verbally intimidate teammates and league participants. The first confirmed incident would result in coaches' counseling and parent notification. A second confirmed incident will result in a warning, extra laps, and parent notification. A third confirmed incident would result in a one game suspension. Any subsequent incidents will result in progressive disciplinary measures up to and including dismissal from the program.
- Be involved in physical altercations (fighting) with teammates, league participants, or any other person. Initial violations will result in a warning, extra laps, and parent notification of the incident and a possible one game suspension. A second offense may result in dismissal from the program.
- Be involved in community misconduct. Confirmed community misconduct will result in an immediate one-week suspension. A second confirmed incident would result in dismissal from the program.
- Use or be in possession of tobacco products, alcohol, or illegal drugs. If a player is charged by the police with use of possession of tobacco products, alcohol, or illegal drugs, the individual will be placed on indefinite suspension pending disposition of the case. If convicted, the individual will be dismissed from the program.

All violations of the Standards of Conduct will be reported to the Board of Directors of the Grant Jr. Bulldogs, and while there are steps for discipline in this standard, the circumstances of the violation will dictate the penalty. Flagrant violation(s) may result in a more severe penalty being imposed. The final decision will be the responsibility of the Lakeland Cardinals Board of Directors, and all Board decisions are final. In the event of a dismissal, all fees paid to the Lakeland Cardinals will be forfeited.

Athletes Signature

Date

Parent or Guardian Signature

Date

DOCTORS MEDICAL RELEASE FORM



Grant Jr. Bulldogs Football & Cheerleading

Medical Release

Date: _____

Based on recent physical and past medical history, I release _____ to participate in the Grant Jr. Bulldogs Football/Cheerleading without any restrictions.

Please be aware of the following conditions, e.g. asthma, diabetes, etc.

Sincerely,

Physicians Signature

Date

Please stamp with office stamp.

Physician's Address (no Stamp)

Office Stamp

***This release must be completed and turned in to the Grant Jr. Bulldogs prior to July 15, 2010.
Without medical release & IHSA Sports Physical your child can not begin practicing.***