



SIX MILE RECREATION
Football/Cheerleading Registration Form
Fall 2023 Season



Participant's Name _____ Gender: M F Date of Birth _____

Age _____ Grade _____ School _____

Uniform Size: Youth: XS S M L XL Adults: S M L XL (add \$5 more for Adult XXL)

Player Number: 1st Choice: _____ 2nd Choice: _____ 3rd Choice _____

Mother/Guardian

Name: _____

Address: _____

City: _____ Zip: _____

EMAIL: _____

Phone Numbers: (H) _____

(C) _____

I am willing to be a: Coach Assist Team Parent

Father/Guardian

Name: _____

Address: _____

City: _____ Zip: _____

EMAIL: _____

Phone Numbers: (H) _____

(C) _____

I am willing to be a: Coach Assist Team Parent

Emergency Contact: _____ Phone Number: _____

Relationship to Participant: _____

Health restrictions, medications, allergies, injuries, etc.: _____

Registration fees are due at the time of registration. Six Mile Recreation and SC Recreation and Parks Association require that insurance be taken out through the Recreation Department for all sports activities. A charge of \$6 for this insurance is included in your registration fees.

Please circle the age division for your child

Football Registration Fees

League	Age	Fee
8U	7 - 8	\$75
10U	9 - 10	\$75

Cheerleading Registration Fees*

League	Age	Fee
8U	7 - 8	\$30
10u	9 - 10	\$30

*Plus the cost of uniform

Waiver paragraph: _____ (child) has my permission to participate in football/cheerleading activities sponsored by the Six Mile Recreation Department. I have purchased the required insurance coverage and I hereby release the Town and the Department from liability due to injury occurring from participation in this sport. I also understand that any spectator that uses any obscene language or directs derogatory remarks toward coaches, referees, players or cheerleading staff before, during or after a ball game is subject to removal from the ballpark. If there is a problem to be addressed, I will contact the Recreation Director or a Recreation Board Member.

Parent/Guardian Signature: _____

Date: _____

Date Paid: _____	Amt: \$ _____	Cash/Check#: _____	Rcpt#: _____	Birth Cert.? _____
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