



# Lakeshore Youth Athletic Association

Please complete the following for our Fall 'Cheerleading & Volleyball' Sports Registration.

- \_\_\_ **Cheerleading (Tackle) \$120.00**  
Including 7<sup>th</sup> graders not cheering for middle school
- \_\_\_ **Cheerleading (Flag) \$120.00**

**CHEERLEADING REGISTRATION  
CLOSES on AUGUST 26<sup>th</sup>, 2010**

- \_\_\_ **Volleyball (3<sup>rd</sup> grade – 9<sup>th</sup> grade) \$80.00**

**VOLLEYBALL REGISTRATION CLOSES:**

**AUGUST 26<sup>th</sup>, 2010 for 3<sup>rd</sup> – 6<sup>th</sup> GRADES  
AUGUST 31<sup>st</sup>, 2010 for 7<sup>th</sup> – 9<sup>th</sup> GRADES**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ GENDER: M / F

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

SHIRT SIZE (Circle one)      Youth: XS S M L XL      Adult: S M L  
PANT SIZE (Circle one)      Youth: XS S M L XL      Adult: S M L

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_  
Cell Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
Work Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

**Medical History:** (To be completed by parent or guardian)

**Is there any history of:**

- A. Birth Deformities (one eye, one kidney, etc.)?
- B. Past illness of more than one-week duration?
- C. Medical conditions currently under treatment?
- D. Fractures or other disabling injuries in the past?
- E. Any deformities or disabilities?
- F. Allergies (food, stings, drugs, etc.)?
- G. Mental Disorder or convulsions?
- H. Currently on prescription drugs?

**Circle One**

- |     |    |
|-----|----|
| Yes | No |
| Yes | No |
| Yes | No |
| Yes | No |
| Yes | No |
| Yes | No |
| Yes | No |
| Yes | No |

Explain any yes answers:

To mail your registration, please complete the registration form, attached a check written to LYAA and mail it to our address:  
LYAA – Registration, PO Box 5146, Mooresville NC 28117

CHECK #: \_\_\_\_\_ CASH: YES / NO      Note: All Registration fees are non-refundable.

**I HAVE READ THE INCLUDED "MINOR WAIVER/RELEASE" AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND THE SERIOUSNESS OF THE RISKS INVOLVED IN PARTICIPATING IN THIS PROGRAM, MY PERSONAL RESPONSIBILITIES FOR ADHERING TO RULES AND REGULATION AND CODE OF CONDUCT, AND ACCEPT THEM AS A PARTICIPANT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

\_\_\_\_\_  
(PARENT/GUARDIAN SIGNATURE)

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
(Date Signed)

# READ BEFORE SIGNING

## Code of Conduct Agreement

I hereby acknowledge, agree and consent, on behalf of me and my child, to abide by the LYAA Code of Conduct posted at [www.lyaasports.org](http://www.lyaasports.org). I further understand, acknowledge and agree that any violation of the LYAA Code of Conduct by me, my child and/or any other parent or guardian of my child, can result in disciplinary action, including suspension and/or probation of me, and/or my child and/or any other parent or guardian of my child, as determined appropriate, in the sole discretion of the LYAA Board of Directors.

## Minor Waiver/Release (Release of Liability for minor participants)

IN CONSIDERATION OF my child/ward, being allowed to participate in any way in the Lakeshore Youth Athletic Association related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The undersigned parent or guardian of the above named participant in youth sports activity sponsored by the Lakeshore Youth Athletic Association (LYAA), hereby gives my consent to his/her practicing, playing, and otherwise participating in said related activity. I affirm that to the best of my knowledge that the above named child is physically capable of participating in the sport or activity named. I further understand that the responsibility for identifying medical needs of the above named child is mine and not that of the LYAA, its coaches, officials, or representatives; and,
2. The risk of injury to my child/ward from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
3. I grant permission for treatment deemed necessary for a condition arising during participation in these activities, including medical or surgical treatment recommended by a medical doctor. I understand that every effort will be made to contact me prior to treatment; and,
4. I FOR MYSELF, SPOUSE, AND CHILD/WARD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child/ward's participation; and,
5. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child/ward's readiness for participation and/or in the program itself, I will remove my child/ward from the participation and bring such attention of the nearest official immediately; and,
6. I for myself, my spouse, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Lakeshore Youth Athletic Association; its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child/ward's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law; and,
7. I, for myself, my spouse, my child's/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, hereby indemnify and hold harmless all the above Releasees from any and all liabilities incident to my child's/ward involvement or participation in these programs, even if arising from their negligence, to the fullest extent permitted by law.