

Kansas City Athletic Cheer
Cheerleader Registration Form

Today's Date: _____

Cheerleader's Name: _____

Cheerleader's Birthdate: Month _____ Day _____ Year _____

Current Grade: _____

School: _____

Parent's Name: _____

Address: _____

Phone: _____

Cell: _____

Email Address:

(We send a lot of info via email – please provide any and all that you want info sent to)

___ Team Member ___ Recreational ___ Tumbling Class ___ Other