## **REGISTRATION FORM**

Name:		Sex:	
Age:	Date of Birth:		
Address:			
Phone Numbe	r:		
School:			
Emergency Co	ontact Person:	Relationship:	
Arts Ensemble	e. All information listed is ac	lew Generation Fancy Drill Team & Perforecurate to the best of my ability; I do under, ally discharge me from the group.	
Youth Particip	pant Signature	Date	
the New Gener release the Ne claims for dan activities by m or indirectly to above named o	ed, in consideration of accepration Fancy Drill Team & F w Generation Fancy Drill Te nages that may be incurred. y child or ward, including tro o his/her participation in said	ptance of the above named child's participal Performance Arts Ensemble, do hereby wai weam & Performance Arts Ensemble from an As a result of injuries sustained in the abor ansportation to and from such performance of activities. I do, hereby, grant permission the New Generation Fancy Drill Team &	ive and ny and all ve stated es related
Parent/Guard	ian Signature	Date	
Client Number	(Applicable if CHA Resident)		