

Anchor Bay Buccaneers CHEERLEADING SQUADS

Junior Varsity / Varsity

Name : _____

Address : _____

City: _____ zip : _____

Phone number : _____

Date of birth _____ age: _____

Parent/Guardian : _____

Emergency Contact : _____

Parents Information

Name : _____

E-mail Address : _____

Telephone Contacts : _____ cell _____

Size of shirt _____ pant _____

Is there a sibling playing Football yes / No

If yes – Name of player _____

Signature of parent _____

Team Representative _____