

CALIFORNIA FLYERS PARENT CARD
(Please write legibly)

PARTICIPANT'S NAME _____ BIRTHDATE _____ CURRENT AGE _____
AGE on August 31, 2011 _____ CURRENT GRADE _____ HOME # _____

Please list contact information for Team Roster:

EMAIL ADDRESSES _____
(provide all emails where you would like information & billing sent)
CHEERLEADER EMAIL & Cell #: _____

MAIN ADDRESS _____ CITY _____ ZIP CODE _____

MOTHER'S NAME _____ cell # _____ FATHER'S NAME _____ cell # _____

HOW DID YOU HEAR ABOUT US? _____
LIST PREVIOUS EXPERIENCE (if any): _____

WHY DO YOU WANT TO BE INVOLVED IN OUR ALL STAR PROGRAM?

PROGRAM PREFERENCE: AIRFORCE **OR** SHOOTING STARS (circle one)

WHY? _____

ARE YOU A CHEERLEADER FOR 2009-2010 FOR ANOTHER ORGANIZATION? IF SO WHICH ORGANIZATION OR SCHOOL? _____

WOULD YOUR PARENT BE WILLING TO ASSIST W/ TEAM ACTIVITIES? YES NO (circle one)

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