| Alief Steelers | Alie | f St | teel | er | S |
|--|---------------------------------|-------------------|---------------|--|--------|
| P. O. Box 722131 Houston, Texas 772 | Alief Steeler | s Registration Fo | F | e: 713-220-0193 il: alief_steelers@ | |
| Registrant Info | Besite Eevel | h, JV, Varsity | | l/Cheer/Drill | |
| Address: | First | Last | | Middle | M/F |
| Phone No. : _ | | Email: | State | Zip Co | |
| Additional Info: Grade: | Name of School No. Year Played: | _ Team (s): | Date of Birth | | Veight |
| Mother's: | Name | Cell Pho | ne No. | Work Pho | ne No. |
| Mother's Occupation: | | | | | |
| _ | Name | Cell | Phone No. | Work Phone No. | |
| Emergency C | | · | | | |
| Have Hospital | Name I Insurance? | Kela | ation | Phone No. | |

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football, cheerleading, dance, gymnastics, acrobatics, stunting, running, tackling, climbing and other activities which involve motion, rotation or height, there is the risk of injury and death. I do hereby, of my own free will, give my child permission to participate in Alief Steelers programs. I voluntarily release, discharge and agree to save and hold harmless and indemnify Alief Steelers, its staff and anyone acting on behalf of the Alief Steelers Organization, from any and all liability, claims, demands or causes of action of any type arising out or related to any loss, damage or injury, including death, that may be sustained by my child while on or about Alief Steelers property or participating in Alief Steelers programs, or trips, from any cause of any type,

_ I understand that in any physical activity such as but not limited to

Yes/No

LIABILITY AND MEDICAL RELEASE

Athlete's Name_

including, but not limited to, the negligence of Alief Steelers or its staff, or anyone acting on its behalf. I make this release for the child, our family, our heirs and representatives of our estates and myself. In case the need for medical treatment for my child should arise, I hereby authorize the Alief Steelers Organization to seek what is, in their best judgment, appropriate treatment.

| THIS IS A FULL RELEASE OF ALL CLAIMS AGAINST T | HE ALIEF STEELERS ORGANIZAT | ION AND ITS STAFF. I HAVE READ IT ANI |
|--|-----------------------------|---------------------------------------|
| UNDERSTAND IT. | | |

| | Parent/Guardian's Signature | Date | |
|------------------------------|---|----------|--|
| Boys Shirt Size: Check | Girls Shirt Size: (Check one) | | |
| Youth X Small | Youth XSmall | | |
| Youth Small (6-8) | Youth Small (6-8) | | |
| Youth Medium (10-12) | Youth Medium (10-12) | | |
| Youth Large (14-16) | Youth Large (14-16) | | |
| Youth X Large | Adult Small | | |
| Adult Small | Adult Medium | | |
| Adult Medium | Adult XLarge | | |
| Adult Large | Girls Shorts Size: (Checl | (one) | |
| Adult X Large | Youth Small (6-8) | | |
| | Youth Medium (10-12) | | |
| Boys Pants Size: (Check one) | Youth Large (14-16) | | |
| Youth Small (6-8) | Adult Small | | |
| Youth Medium (10-12) | Adult Medium | | |
| Youth Large (14-16) | Adult Large | | |
| Youth X Large | | | |
| Adult Small | Girls Shoe Size: | | |
| Adult Medium | (include if youth or adu | lt size) | |
| Adult Large | *please put shoe size 1 Larger because cheer & | 1/2 size | |
| Adult X Large | shoes run very small | | |

