

2008 LAKE NORMAN GIANTS REGISTRATION FORM

For Board Use Only	
AGE _____ <small>(As of 7/31/2008)</small>	Weight _____
<input type="checkbox"/> New	Coach _____
<input type="checkbox"/> Returning	

<u>Player / Cheerleader</u>		
Name: _____	Birth Date: _____	
Address: _____		
Street Address	City / ST	Zip Code

Contact Information (Parents / Guardian)

<u>Contact 1</u>
Name: _____
Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/>
Email _____
Home Phone _____
Cell Phone _____
Work Phone _____

<u>Contact 2</u>
Name: _____
Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/>
Email _____
Home Phone _____
Cell Phone _____
Work Phone _____

Volunteer Committee Opportunities		
(Check <u>ALL</u> that you interested in. <u>Every Family Must Volunteer</u>)		
Game / Field Help	Team Support	League Support
<input type="checkbox"/> Registration Help	<input type="checkbox"/> Team Parent	<input type="checkbox"/> Equipment Inventory
<input type="checkbox"/> Program Assembly / Distribution	<input type="checkbox"/> General Support	<input type="checkbox"/> Program Assembly / Distribution
<input type="checkbox"/> Field Set-up / Clean-up	<input type="checkbox"/> LKNGiants Card Sales	<input type="checkbox"/> Sales: Corporate Sponsorship
<input type="checkbox"/> Bowl Game Support	<input type="checkbox"/> T-Shirt Sales	<input type="checkbox"/> General Admin (As Needed)
	<input type="checkbox"/> Equipment (Repairs/Maint.)	

I (Parent/Guardian) acknowledge that I have received a copy of the Lake Norman Giants Policy & Information packet and I agree to, the registration requirements as stated.

<u>Method of Payment</u>
<input type="checkbox"/> Cash
<input type="checkbox"/> Check# _____

Parent / Guardian SignatureDate