

**FLORIDA SPRING YOUTH FOOTBALL LEAGUE
CHEERLEADER HARD CARD**

TEAM NAME _____

CHEERLEADERS NAME: _____

PLAYERS ADDRESS:

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

PARENT/GUARDIANS NAME: _____

PHONE: _____ OTHER PHONE: _____

I swear and affirm that the aforementioned information is true, and I fully understand that forfeiture will occur if any false or misleading information has been provided

PARENT/GUARDIANS SIGNATURE: _____

Fees Paid ____ Photo Verified ____



SEASON GAMES WEIGH IN VERIFICATION			
	CODE (Reg,Post,SB)	OFFICIAL INITIAL	DATE OF GAME
1			
2			
3			
4			
5			
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11			