



Termite Cheer

2026-2027



## Student Information

Name: \_\_\_\_\_ Grade in 2026-2027: \_\_\_\_\_

## Parent/Guardian Information

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Emergency Contact Information

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

By signing below, I give my permission for my child to participate in the 2026-2027 Termite Cheer activities. I understand that my child will be required to attend practices and participate in team events. I also acknowledge that cheerleading involves physical activity, and I am aware of the risks involved.

Parent/Guardian Signature: \_\_\_\_\_

Return form to the front office by Friday, March 13<sup>th</sup>.

For any questions, contact Heather Pittman at 334-207-3803 or Kasi Scarborough at 334-399-6264.