



# 2012-2013 FIERCE ATHLETE APPLICATION

**Athlete's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_  
**Age of August 31, 2011:** \_\_\_\_\_ **How did you hear about us?** \_\_\_\_\_  
**DOB:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Home phone:** \_\_\_\_\_  
**City/State/Zip:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**School Attending:** \_\_\_\_\_ **School District:** \_\_\_\_\_

**LIST ANY MEDICAL CONDITIONS:** \_\_\_\_\_

**If an athlete requires an inhaler or any necessary medications-Fierce must have it on hand for emergencies. If an athlete is asthmatic-he/she must have an inhaler in their possession at all times.**

**Mother's Name:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_ **2nd E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City/State/Zip:** \_\_\_\_\_  
**Mother's Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_ **2nd E-mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City/State/Zip:** \_\_\_\_\_

**TUMBLING SKILLS:**

**STANDING TUMBLING:** \_\_\_\_\_  
**RUNNING:** \_\_\_\_\_

**STUNT SKILLS:**

**FLYER:** \_\_\_\_\_  
**BACK SPOT:** \_\_\_\_\_  
**BASE:** \_\_\_\_\_

**APPLYING FOR: (CHECK ALL THAT APPLY)**

- \_\_\_\_\_ **LEVEL 1 TEAM**
- \_\_\_\_\_ **LEVEL 2 TEAM**
- \_\_\_\_\_ **LEVEL 3 TEAM**
- \_\_\_\_\_ **LEVEL 4 TEAM**

**Please understand that an athlete must meet the stunt and tumble skill level to be considered for an upper level team. IF AN ATHLETE WISHES TO BE ON A HIGHER LEVEL TEAM HE/SHE WILL HAVE TO ATTEND TUMBLING CLASSES TO ATTAIN THE REQUIRED SKILL.**

**OFFICE USE ONLY: APPLICANT HAS RECEIVED ,SIGNED, AND READ THE FOLLOWING:**

- \_\_\_\_\_ **MEDICAL WAIVER FORM**
- \_\_\_\_\_ **LIABILITY RELEASE FORM**
- \_\_\_\_\_ **FIERCE GYM PARENT POLICY**
- \_\_\_\_\_ **FIERCE GYM ATHLETE POLICY**

**INFORMATION HAS BEEN RECORDED:**

- \_\_\_\_\_ **FIERCE BOOKKEEPING SYSTEM**
- \_\_\_\_\_ **FIERCE PLATFORM/E-MAIL AND ALL ATHLETE INFORMATION**

**MOTHER SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**FATHER SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ATHLETE SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_