



JUNIOR HIGH FALL ACTIVITY FORM

Student Name _____

Parent Name _____

Address _____

Student Age/Grade _____

Parent Phone _____ School attending Fall 2024 _____

Parent email _____

Amount enclosed \$ _____

Please select a fall activity

- Marching Band - \$125 _____
- Football - \$200 _____
- Soccer - \$125 _____
- Cheerleading Fall Only - \$150 _____
- Cheerleading Full Year - \$200 _____

Please print, complete and mail the following forms to Greensburg Central Catholic, c/o Ruth Ann Grant, 911 Armory Drive, Greensburg, Pa 15601 and enclose a check for the stated amount above:

- This Registration Form
- Consent Form Signed by a Physician
- Concussion Form
- Cardiac Arrest Form
- Player Code of Conduct
- Parent Code of Conduct

Please list any injuries or allergies
