

Annual Winter Cheerleading Clinic

Hosted by the GCHS Cheerleaders



WHO: Grades K-6th

WHEN: Monday, Feb 19th 5:30-7:30PM

On-site registration begins at 5PM

WHERE: GCHS Main Gym

COST: \$30—non-refundable

Registrations & payment received by February 9th will receive a FREE shirt and bow.

Performance for family and friends will take place at the **Boys' Varsity Basketball game Thursday, February 22nd** in the main gym-- more information will be provided at the clinic.

****Participants wearing their clinic shirts will get in free to the game. All spectators will need to purchase a ticket.**

To REGISTER: Please send this form *Attn: Laken Rosing Cheerleading Coach; Greenfield Central High School, 810 North Broadway St., Greenfield, IN 46140* before 2/9/2018 with a payment of \$30 per participant. Registration and payment received after 2/9/2018 ARE accepted but **do not** guarantee the shirt or bow.

*****Please wear athletic shoes and clothing. Hair must be pulled back and off the shoulders. For safety purposes, no jewelry or gum permitted. If you have any questions, feel free to contact Laken Rosing at lrosing@gcsc.k12.in.us**

Participant Name: _____ Current Grade: _____

Contact Email: _____ Phone: _____

Shirt Size: YOUTH: S M L XL or ADULT: S M L XL (Circle One)

Parents/Family can purchase matching shirts for an additional price-- \$10 for youth size, \$12 for adult size

Additional Shirt Order: _____ please indicate quantity and size(s)

GCHS Cheerleading Mini Camp Medical and Liability Release:

_____ elects to take part in the GCHS Cheerleading event, which is sponsored by the GCHS Cheerleading squad. I/We understand that our son/daughter is required to be in good physical shape and condition. I/We understand that cheerleading is an activity in which the risk of injury is high; that any one of the routines involving our son/daughter's participation in cheerleading activities in general could lead to serious injury, including partial or total paralysis, even death. Despite this understanding of the possibility of serious or catastrophic injury or death and the risks involved, we consent to the participation in this activity by our son/daughter. I/We agree to, and by the signing of the agreement, release the coaches, volunteers, staff of Greenfield Central High School, and the Board of Education from any claim of negligence by ourselves, our son/daughter, our heirs, executors and assigns, from any liability arising from claims for damages for injury to our son/daughter and any claims for loss or damage to his/her property which may arise out of his/her participation. I hereby agree that I am responsible for any required medical treatment, and give permission for my child to receive medical treatment in the event that I am unable to be contacted. In order that participant may receive necessary treatments, I hereby hold Greenfield Central High School and their Cheerleaders, and coaches harmless in the exercise of this authority.

Parent/Guardian Signature: _____ Date: _____