

Dragon Cheer
2015 Summer Cheer Clinic

**Sponsored by: Cheerleaders of
Carroll Senior High & High School**

**Where: Carroll High School
Cafeteria**

When: August 3-6, 2015

9:00 am to 12:00 noon

Ages: Kindergarten – 6th grade

For more information, visit:
www.carrolldragoncheer.com

Cheer Instruction: The activities will include the fundamentals of cheerleading suitable for each age group. Camp includes a free t-shirt, snacks and water daily and award certificate.

Showoff: Parents and family members are encouraged to attend the cheering exhibition on Thursday at 11:30 am where the girls will show off what they have learned. Cameras welcome!

Cost: \$100 pre-registration, \$110 walk - up To receive the discount, Pre-registration must be received by July 30th, 2015. Make Checks out to Dragon Cheer.

*Snacks and water will be provided free of charge. Concessions and sales table will be open for campers to purchase items.

Mail to: DRAGON CHEER
c/o Linda Tyler
1024 W. Winding Creek Drive
Grapevine, TX 76051

For more information:
Email: lindaktyler@verizon.net
Phone: 214.763.8760

2015 DRAGON CHEER SUMMER CLINIC REGISTRATION

August 3, 4, 5, 6, 2015 9:00 AM to 12:00PM Parents Show: 11:30 on Thursday

Cost: \$100 if pre-registered, \$110 day of camp (checks payable to Dragon Cheer)

Child's Name _____

Parent's Name _____

Phone Number: _____ Alternate Phone Number: _____

Grade (2015-2016) _____ School _____

Address: _____

Street

City

Zip code

Does your child have any known allergies and/or physical restrictions?

Please circle T-shirt size: CS CM CL AS AM AL

Release Form: We the parents of the above named do hereby grant permission for her/him to participate in the CHS Cheer Camp and acknowledge the fact that she/he is physically able to participate in camp activities. We understand that the CHS Cheer Camp does not provide medical insurance covering injuries of any nature incurred during the 2015 CHS Cheer Camp. The undersigned hereby releases the CHS Cheer Camp and Carroll Schools from any and all claims, demands, and causes of action whatsoever in any way growing out of or resulting from the participation in the CHS Cheer Camp.

Parent Signature _____

Parent's e-mail address: _____

For office use only:

Clinic Registration Fee: date: _____ check # _____ amount \$ _____

