

*\*\*A portion of all proceeds will be donated to the I.W.I.N.--Indiana Women in Need-- Foundation supporting Indiana women fighting breast cancer\*\**



# Annual Fall Cheerleading Clinic

Hosted by the GCHS Cheerleaders

**Friday, October 12th, 2018**

**WHO: Grades K-6th**

**WHEN: 8:30-10:30 AM On-site registration begins at 8AM**

**WHERE: GCHS Field House**

**COST: \$30—non-refundable**

**Registrations & payment received by September 30th will receive a FREE shirt and bow.**

**\*\*First 45 registrants are guaranteed the pink breast cancer awareness bow pictured above\*\***

Performance for family and friends will take place at the Varsity football game later that night: Friday, October 12th-- details/more information will be provided at the clinic.

**\*\*Participants wearing their clinic shirts will get in free to the game!**

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

*If you have any questions, feel free to contact Laken Rosing at [lrosing@gcsc.k12.in.us](mailto:lrosing@gcsc.k12.in.us)*

Participant Name: \_\_\_\_\_ Grade (Fall 2018): \_\_\_\_\_

Contact Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Additional Shirt Order (\$18 each--long-sleeved) : \_\_\_\_\_**

GCHS Cheerleading Clinic 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 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: \_\_\_\_\_