

Cheer with the Yuma Catholic High School 2016-2017 Cheerleaders



YCHS Cheer Clinic Come "Catch the Spirit"

3 Hour Instructional Clinic with the Yuma Catholic High School Cheerleaders teaching motions, jumps, cheers, and a half-time performance to be performed at a Yuma Catholic High School Varsity Football Game!!

When: Saturday, October 15, 2016 from 9:00AM-12:00PM

Where: Yuma Catholic High School Gym

Who: Any child ages 4yrs to 8th grade

Cost: \$35.00 (Includes a t-shirt and snack)

Due: Please drop off or mail Registration Form and Checks no later than October 3, 2016 to:
Yuma Catholic High School Cheer
Attn: Coach LoCoco
2100 W. 28th Street, Yuma AZ 85364

Checks made payable to **Yuma Catholic High School Cheer**

****You may register after October 3, 2016 and/or the day of, but there is a chance that you will not receive a t-shirt.****

Registration/Check-In: 8:30-8:50AM (Front West Doors of the YC GYM)

Clinic will begin promptly at 9:00AM

Please pick-up your child in the YC Gym no later than 12PM. Attendees will perform material learned at 11:45AM for parents.

Performance:

Friday, October 21, 2016

Yuma Catholic vs. Valley Christian HS 7:00PM During Half-time.

Performers are to wear solid color shorts with YC Cheer Clinic Shirts.

Cost to enter Football game is not included and will not be waived.

For more information please contact Coach Denelle LoCoco at denelle.lococo@gmail.com

Please fill out and return the portion below No later October 3, 2016 to ensure a T-Shirt.

Yuma Catholic High School Cheer Clinic Registration Form

Child's Name: _____

Child's Age/Grade: _____

Home Phone Number: _____

Parent's Email Address: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Allergies or Medical Concerns: _____

In consideration of the opportunity to participate in the cheerleading activities, I, on behalf of my child, agree to release, indemnify, and hold harmless YCHS employees, cheerleaders, coaches, and all volunteers from any and all responsibilities of liability for personal injury that may occur while my child is engaged in the physical activities or otherwise participation of the 2016-2017 YCHS Cheer Clinic.

Parent Signature: _____ Date: _____

T-Shirt Size: Please circle only one

Youth Sm

Youth Medium

Youth Large

Youth XL

Adult Sm

Adult Medium

Adult Large