



6th Annual

Saturday, March 1, 2014 9:00 am - 12:30 pm Johnson High School (same day registration begins at 8:00 am)

Clinic Cost: \$30 Includes t-shirt, lunch, bottled water and a photo with Johnson Cheerleaders Group show-offs begin at 12:30 pm

> Make checks payable to: JOHNSON HIGH SCHOOL

Ages K - 11th grade Great preparation for tryouts!

For more information, email: jagcheerclinic13@gmail.com or call 210-823-9496

Pre-register (postmark) by February 21st to guarantee apparel. Spirit Retail available on clinic day!

Mail form & payment to: Mila Blanton

3503 Clairmont, San Antonio, TX 78259

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R	Child's Name		Pre-Order Clinic Apparel
	Age School	Grade	Circle Sizes
G	Parent's Name		Cub Clinic T-shirt (free with registration)
	Phone number where parent can be reached during clinic		YXS YS YM YL
s	Address		AS AM AL
T	Email address		Jag Cheer Shorts (optional)
R	You will receive an email confirmation once registration is processed.		# @ \$15 =
A	Allergies		YS YM YL AS AM
T	In case of emergency, please allow my child to receive medical attention from:		Additional Clinic T-shirts
[] []	Physician's NamePhor	ne	(optional) # @ \$10 =
N	I will not hold North East Independent School District or its employees liable for accidents which may occur during clinic activities.		YXS YS YM YL
F	Parent/Guardian Signature	Date	AS AM AL Matching Hair Ribbon(s) (optional)
0	I give permission for my child to be photographed. (photos possibly featured in news articles regarding clinic)		#@ \$1 =
R M	Parent/Guardian Signature	Date	Cheer Clinic Registration Fee = <u>\$30</u>
	REGISTRAR'S USE ONLY: Check # Amount \$	Date	TOTAL ENCLOSED: \$