



JAG cheer CUB CLINIC

Saturday, March 2, 2013

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

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!

Make checks payable to:
JOHNSON HIGH SCHOOL

Mail form & payment to: Mila Blanton
3503 Clairmont, San Antonio, TX 78259

cut here

Child's Name _____

Age _____ School _____ Grade _____

Parent's Name _____

Phone number where parent can be reached during clinic _____

Address _____

Email address _____

You will receive an email confirmation once registration is processed.

Allergies _____

In case of emergency, please allow my child to receive medical attention from:

Physician's Name _____ Phone _____

I will not hold North East Independent School District or its employees liable for accidents which may occur during clinic activities.

Parent/Guardian Signature _____ Date _____

I give permission for my child to be photographed. *(photos possibly featured in news articles regarding clinic)*

Parent/Guardian Signature _____ Date _____

Pre-Order Clinic Apparel

Circle Sizes

Cub Clinic T-shirt
(free with registration)

YXS YS YM YL

AS AM AL

Jag Cheer Shorts
(optional)

_____ @ \$15 = _____

YS YM YL AS AM

Additional Clinic T-shirts
(optional)

_____ @ \$10 = _____

YXS YS YM YL

AS AM AL

Matching Hair Ribbon(s)
(optional)

_____ @ \$1 = _____

Cheer Clinic
Registration Fee = \$30

**TOTAL
ENCLOSED: \$ _____**

REGISTRAR'S USE ONLY: Check # _____ Amount \$ _____ Date _____

REGISTRATION FORM