

SETON-LA SALLE BASKETBALL CHEER CAMP

LIL' REBEL CHEERLEADERS...



PLEASE JOIN OUR 2009-2010 SETON-LA SALLE REBEL
CHEERLEADERS FOR A NIGHT OF FUN AND CHEER!

CHEERLEADERS IN GRADES K THROUGH 8

THURSDAY, FEBRUARY 11, 2010 6:30 PM TO 8:30 PM SETON-LA SALLE HIGH SCHOOL GYM

Cheerleading Clinic Fee: \$25.00 - Includes a T-shirt, Pompoms, snack (chips, pretzels) & water.

ALL LIL' REBEL CHEERLEADERS ARE INVITED TO CHEER, WITH OUR CHEERLEADERS, AT
THE FEBRUARY 13, 2010, BASKETBALL GAME AT SETON-LA SALLE H.S.

Please complete the registration form below and return to: Fran Colosimo

101 Doubletree Drive

Venetia, PA 15367

Make checks payable to Seton-La Salle

For more information, please call Fran at 412 680-5711 or Cathy at 412 478-5853

REGISTRATION DUE BY FEBRUARY 4, 2010

Cheerleader Name: _____ Parent's Name: _____

Address: _____ Phone: _____ Cell: _____

School Currently Attending: _____ Current Grade: _____

T Shirt Size: Youth Sm _____ Med _____ Lg _____ Adult Sm _____ Med _____ Lg _____

Parent/Guardian Authorization: I hereby approve of _____ participating in the Seton-La Salle Cheerleading Clinic and certify that he/she is in good health and able to participate in the program activities. I authorize that the program directors act for me according to their best judgment in any emergency requiring medical attention, for which service I shall pay. I also agree to release, waive, and discharge Seton-La Salle Catholic and its Clinic coordinators of any responsibility in the case of an accident or injury. Snack Restrictions: _____.

Parent Signature: _____ Date: _____

Emergency Contact Person: _____ Phone: _____