Misericordia University Cheerleaders Will Host
One Day Cheer Clinic

The Misericordia Cheerleading program will host a cheerleading clinic for all school age athletes on Saturday, August 29th from 10:30-4. Athletes should check-in between 10:15 and 10:30 in the Anderson Athletic Center. The clinic will include stunting with the Misericordia cheerleaders, dance class, sideline class, jump class and tumble class. Classes will be age/ability appropriate. Participants will receive a t-shirt. The day will conclude with a showcase for parents! Lunch will be provided. **COST:** $35 ($5 sibling discount). Please make checks payable to Misericordia University Cheerleading.

To register, please complete the form below and submit to:
Tara Sinclair – Head Coach
Misericordia University Cheer Program
301 Lake Street
Dallas, Pa 18612

Registration and payment must be received by August 21, 2015 to receive the clinic t-shirt.

**Registration Form**

Athlete’s Name: __________________________________________

DOB: ___________ Age: _______ Grade: _______ T-Shirt Size: _______

Parent Contact: ___________________________________________ Contact #: _______________________

Emergency Contact: ___________________________________________ Contact #: _______________________

☐ $35 Payment is enclosed. Checks made payable to Misericordia University Cheerleading

**Release** - I agree to the above person’s participation in the cheerleading clinic hosted by Misericordia University, instructed by the Misericordia cheerleading program’s cheerleaders and coaches. I waive, discharge, and forever hold harmless Misericordia University, its officers, directors, employees, volunteers and all other event staff from liabilities, claims, or demands resulting from participation in or usage of equipment.

I fully understand that my participation (or my child’s participation) in this event (Misericordia University Cheerleading Clinic) involves risks and dangers that might result in injury, including permanent disability, paralysis, and death. I am aware that my child will be participating in physically demanding activities, and I note here that my child is qualified, in good health and in proper physical condition to participate in such activities. If at any time during the event I feel or my child feels conditions are unsafe, participation will be discontinued. In the event of an emergency, I authorize that medical attention be administered to the participant named above.

______________________________  ______________________
Parent Signature                       Date

Permission is granted to use my son’s/daughter’s/ward’s photograph in future brochures, advertisements or other literatures for events sponsored by Misericordia University’s cheerleading program.

______________________________  ______________________
Parent Signature                       Date