

Brought to you by the Siegel High School Cheerleaders



When: Thursday, July 20, and Friday, July 21, from 9:00 a.m. to 12:00 p.m. Cheer Showcase on Friday, July 21, at 11:30 a.m. in the gym



Where: Erma Siegel Elementary School - Gymnasium



Who: Open to all students entering 1st grade through 6th grade



Register by Friday, June 23, to receive a Rising Stars Cheer Clinic T-Shirt!!



Learn cheers, chants and jumps from the Siegel High School Cheerleaders!!!



Snacks and water provided!!



Only \$40.00 per child!!



Fill out the registration form on the back of this flyer



Mail the completed registration form and fee of \$40.00 (checks made payable to SHSVCBC) to: PO BOX 10852 Murfreesboro, TN 37129



For questions please contact the Siegel High School Cheer Coaches via email: Ms. Crawford crawfordm@rcschools.net or Ms. Shipley: shipleyj@rcschools.net



Last day to register is Thursday, July 20, by 9:00 a.m.

Remember, all participants registered prior to Friday, June 23, will receive a t-shirt!!!



MINOR REGISTRATION FORM (Please Print Clearly in Ink)

Participant's Name:			Name called:			
First			Last			
Date of Birth//		SHIRT SIZE:	Adult: S N	1 LX	Child: S M L XL	
Parent/Legal Guardian _	rent/Legal Guardian Relation					
Home AddressStreet No						
Street No	o. & Name	Apt. #	City		Zip Code	
				_		
Home Phone		Work Phone _		C	ell Phone	
Email		School attending:				
List other family member(s) participating & their age(s):						
Emergency Contact & Phone (other than parent)						
If your child has any allergies, health, or medical needs; please communicate those details in an email to						
Coach Jessie Shipley at shipleyj@rcschools.net						
1 3						
Waiver and Release of Liability & Permission for Minors - PLEASE READ CAREFULLY						
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In consideration for permi	ssion to participate	in this activity I	agree as follo	ws:		
1. I have considered and evaluated the risks, dangers and possibility of injury resulting from participation in this						
activity in which my child or ward is participating.						
			es could occu	r from ac	ctions of my child or ward other	
2. I know and understand foreseeable and unforeseeable injuries could occur from actions of my child or ward, other participants, the City, its employees or volunteers, contractors with the City and other persons involved in the						
activity or not.						
•	ingly assume all co	osts, risks of init	rv and/or oth	er dama	ges for myself and/or my child	
3. I deliberately and knowingly assume all costs, risks of injury and/or other damages for myself and/or my child or ward, including but not limited to cost of medical treatment, permanent injury or death, and property						
					ess the Rutherford County	
					reesboro City School District,	
					ility and from all costs, injuries	
and/or other damages for myself and/or my child or ward (including but not limited to, cost of medical treatment, permanent injury or death, and property damage) from this activity.						
4. If I am not present, or if present, am not able to make decisions, I authorize the Rutherford County School						
District, Siegel High School Varsity Cheerleaders Booster Club, Murfreesboro City School District, their						
employees, volunteers and/or contractors to obtain or provide any first aid or other medical treatment which						
they deem necessary for my child and/or ward at my expense and this is subject to the waiver, release,						
assumption of costs, risks, and hold harmless agreement, etc., set forth in paragraph 3. 5. I give my permission for any photos or video footage of my child or ward taken during this activity to be used for						
educational, promotional, or any other purpose.						
6. I represent that I am the parent/legal guardian of the child I am registering and I give permission on behalf of						
myself and any other parent/legal guardian for this child to participate in the activity. I agree that in the event of						
any lawsuits arising from this agreement of this activity, jurisdiction and venue shall be in the courts for						
Rutherford County, To	ennessee.					
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rarent/Legal Guardian:		Cianatura		_ Date	:	
OFFICE LISE ONLY	Chaolz/MO #:	Signature			Coch Amount	
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FA: Full: Partial:	ву:	I	Jaie:			