



Lake Norman Charter High School's

# 2018 Winter Cheer Clinic



## Clinic Date: Saturday, January 20, 2018

*Ages: Grades K-8*

*Time: 8:30am-12:00pm (In the LNC High School Cafeteria)*

*Performance Date: Friday, January 26, 2018*

Please complete **BOTH SIDES** and enclose a check or money order, payable to LNC Booster Club, in a sealed envelope. Any questions, please contact [lncscheer@gmail.com](mailto:lncscheer@gmail.com). Registrations can be returned the LNC MS Office or addressed and mailed to the below:

**LNC Winter Cheer Clinic**  
12025 Serenade Ct.  
Charlotte, NC 28215

**Cost:**  
**\$35 per child**



Any additional children in the same family are \$25 each.

Registration fee includes:  
-Clinic Instruction  
-Performance Day Instruction  
-T-Shirt  
-Snack on Clinic Day  
-Participant Admission to 1/26 HS Basketball Game (Spectator tickets sold separately on game day)

\_\_\_\_\_  
Child's Name                      Age                      Name of Parent/Legal Guardian

Circle t-shirt size:

Y-S    Y-M    Y-L    Y-XL    A-S    A-M    A-L    A-XL

\_\_\_\_\_  
Address                                      (\_\_\_\_\_) \_\_\_\_\_  
Home Phone

\_\_\_\_\_  
City, State, Zip                              (\_\_\_\_\_) \_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Family Doctor                              (\_\_\_\_\_) \_\_\_\_\_  
Work Phone

(\_\_\_\_\_) \_\_\_\_\_  
Doctor Phone Number                      Emergency Contact (Other than parent)

\_\_\_\_\_  
Recommended by (If applicable)              (\_\_\_\_\_) \_\_\_\_\_  
Emergency Contact Number

E-Mail Address (required): \_\_\_\_\_

Allergies/Medical Concerns: \_\_\_\_\_

### Important Information:

- Please dress your child in comfortable attire for cheerleading. T-shirt, shorts, tennis shoes and socks should be worn.
- Please be prompt in dropping off and picking up your child.



Your child will be invited to perform with the LNC cheerleaders at the LNC home basketball game on **January 26<sup>th</sup>!** **GO KNIGHTS!!**

Registration at the door is welcomed. Please feel free to share this with friends and neighbors!

## LNCS Cheer Camp Release Form

### **Participation Agreement**

As parent/legal guardian, I realize the risks in injuries involved in the sport of cheerleading, and I agree to hold harmless Lake Norman Charter School Cheerleading Camp organization or support groups of this organization, along with their instructors and volunteer staff, for any and all injuries and/or losses incurred by my child while participating in this camp and I voluntarily assume all such risks. I further agree not to pursue any claims for accident or injury against Lake Norman Charter School or any other support groups or this organization, their respective officers, agents, representatives, successors, and/or assigns for any and all damages which may be sustained and suffered by my child in connection with this camp.

I grant to any representative of Lake Norman Charter School Cheerleading Camp to give permission, consent and approval to any doctor, nurse or hospital to provide normal or emergency medical treatment (including anesthesia) as deemed necessary and in the best interest of my child while participating in this camp. I understand that should a health emergency arise, I will be notified, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized.

Child's Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

### **Photo Release**

As a parent/legal guardian, I give permission for my child to be in photographs taken during the cheer camp. I understand that these will be taken during group activities and may or may not be posted on the LNCS cheerleading website. I agree that my child's picture can be used to promote future cheer camps without their name being attached to the photographs.

Child's Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_