



Calling all Future Cheer Jackets!!
Dust off those poms and make your cheer shoes shine!
The WCHS National Champion Cheer Squad wants YOU
to come to The Future Cheer Jacket Clinic!

Clinic: Saturday, October 20th and Football Game: October 26th

Registration: 8:30am

Clinic: 9:00am -Noon

Parent Show Off: Noon

Where: WCHS Cafeteria

Cost: \$45 (Checks Payable to WCHS)

Campers will receive a T-Shirt, Cheer Bow & Snack!

(In order to receive T-Shirt and Bow at the Clinic, Registration and Fee must be received by October 10th)

Campers will also get to cheer the last home football game on October 26th!

(Campers will get free admission- All spectators, including parents must purchase a ticket)

Mail/Drop Off your registration form along with payment to:

Woodford County High School

Coach Tasha Richardson

180 Frankfort Street, Versailles, KY 40383

What to Bring: All campers will need to bring a water bottle with their name on it. They should wear comfortable athletic clothing and tennis shoes. A snack will be provided. If your child has any dietary restrictions, please bring an appropriate snack with his/her name clearly written on it.

Clinic Description

This clinic is designed to provide young athletes (Potty Trained-Middle School) with the opportunity to work on basic cheerleading skills. The clinic will include instruction on basic cheers and sidelines, dance, jumps, tumbling and stunt techniques.

Campers will receive both individual and group instruction. Campers will learn the importance of working as a team, but will also have the opportunity to develop their individual skills.

Registration Form

Campers Name: _____

Grade: _____ Age: _____ T-Shirt Size: _____

Contact Phone: _____ Email: _____

Medical conditions/allergies or anything we need to know:

I give my permission for my son/daughter _____ to participate in the WCHS Cheerleading Future Cheer Jacket Clinic held on Saturday October 20th and Friday October 26th, 2018. I understand that the nature of the activity involves physical movement and inherent risk of injury. I also state that my son/daughter is physically able to participate in physical activity.

Parent/Guardian Signature:

Date

