

Bonner Springs High School Cheerleading Clinic

Wednesday September 26 and Thursday September 27

CONDUCTED BY THE BONNER SPRINGS HIGH SCHOOL CHEERLEADERS

IT'S TIME FOR OUR ANNUAL CHEERLEADING CLINIC FOR THE KINDERGARTEN – 5TH GRADE GIRLS. *The clinic will be held in the Bonner Springs High School Gym. A USD 204 Bus will transport the girls from their elementary school to the high school for the clinic. Parents must pick children up from BSHS.*

PLEASE BRING YOUR SPIRIT AND SMILES AND COME JOIN US!!!

****You will ride the bus from your school to BSHS where you will meet the BSHS Cheerleaders for the clinic!**

****Wear comfortable clothes and tennis shoes!!**

Pick up time: 5:15 p.m from BSHS. We are unable to provide transportation home after the clinic.

Friday (Sept 28) - Home Varsity game– Game time 7:00 p.m.

****If you attend the clinic, you may attend the game!**

**** Wear your clinic T-shirt, comfortable shorts, pants or a skirt.**

****Arrive by 6:45 p.m.**

****The clinic cheerleaders will cheer with the Varsity cheerleaders for the first quarter of the game**

****Clinic cheerleaders will be released to their parents' care at the beginning of quarter 2**

****Please park in the High School lot on Friday night and enter through the south gate (nearest to K32)**

COST- \$25.00 per person (includes clinic member's admission (and ONE adult admission) to the game, a t- shirt, mini-poms, and a hair ribbon)

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Authorization to participate in the cheer clinic

Name _____ Grade _____ SCHOOL _____

As a parent of _____, I give permission for my student to be transported via USD 204 school bus to Bonner Springs High School and I recognize the risk of injury inherent in participating in any exercise program and agree to assume the responsibility and risk in said participation. I give my permission for my child to participate in the Bonner Springs High School cheer clinic and release and discharge BSHS and the cheer clinic staff from any and all claims and liability arising out of said participation.

Signature of Parent/Guardian

Contact Phone Number

Name of Adult who will accompany the child to the game (for pass gate)

T-Shirt Size- youth- S M L Adult: S M L

Please mail the bottom half of this form and \$25.00 (checks made payable to BSHS Cheer) to :
Bonner Springs High School Cheerleading
100 N. Mc Daniel
Bonner Springs, KS 66012

Please mail by Sept 10 to ensure a T-shirt! Due to the dates of the clinic, we cannot accept late registrations **and** guarantee a T-shirt.