

2017 BROTHER MARTIN CHEER CLINIC

WHO: Girls & Boys ages 4-15 Years Old

HOW: Pre-Register by Mailing/Faxing/
Emailing Registration Form

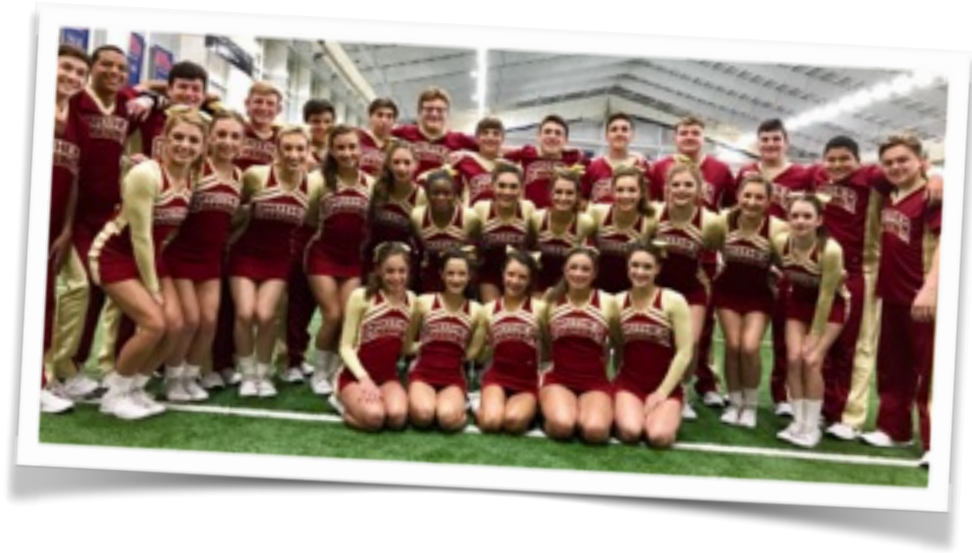
OR

Register at the door November 2nd by 5:20pm

WHEN: Clinic Thursday, November 2nd 5:30-7pm in the
Brother Martin Conlin Gym

: Football Game Half-time Performance Friday,
November 3rd ~8:30pm Brother Martin vs.
Jesuit @ Tad Gormley Stadium. (Game time 7pm)

COST: \$30.00. Price includes T-Shirt & Participant's Admission
to the Game!



2017 BROTHER MARTIN CHEER CLINIC

REGISTRATION FORM

Participant Name: _____

Age: _____

Parent's Name: _____

Cell Phone #: _____

Address: _____

City: _____ State: _____ Zip: _____

Circle T-Shirt Size: YS YM YL AS AM AL AXL

Waiver Form

I, _____, parent/guardian of the participant understand that my child stated above will be participating and learning stunts, cheers, jumps and dance at this clinic. I understand that cheerleading is a risk and by attending and participating in this clinic I agree to handle any all expenses by me or my insurance company. I hereby waive, release and forever hold harmless from any illness or injury, which may occur before, during and after the clinic or in the future against Brother Martin High School, their staff, coaches and volunteers. I understand that I will be notified immediately, in the event of an emergency at the phone number listed above. I agree that all expenses of such treatment will be expensed by me or my insurance company.

I give my child permission to participate in this clinic dated Thursday, November 2nd, 2017 and in the Brother Martin vs. Jesuit High School football game Friday, November 3rd, 2017.

Signature: _____

Print Name: _____ Date: _____

PLEASE MAIL IN THIS REGISTRATION FORM ALONG WITH A \$30.00 CHECK MADE OUT TO BROTHER MARTIN HIGH SCHOOL. YOU CAN ALSO EMAIL OR FAX THE REGISTRATION FORM TO THE BELOW.

Fax Registration Form To:
(504)286-8462
Attn. Kathy Choina

Mail Check and Registration Form To:
Brother Martin High School
Attn: Student Services
4401 Elysian Fields Ave.
New Orleans, LA 70122

Email Registration Form To:
kchoina@brothermartin.com