## Chippewa Valley Cheer Clinic PRE-K-8<sup>th</sup> grade September 17<sup>th</sup> and 18<sup>th</sup> 5:00-7:00 pm

## @Check in at the CVHS auxiliary gym

\$65 per participant

**Director:** Amie Stone email: avernier102003@gmail.com

The Cheer Clinic is open to everyone in Grades PRE –K (age 4) – 8 th Instructors will consist of the Chippewa Valley Cheer Coaching Staff & Varsity Team Clinic will include: Warm-up, Cheer Skills, Basic Stunting & Tumbling Sideline Chants and a Cool Down. We will also provide a snack and drink.

Every pre-registered participant will receive a T-Shirt, bow, and entrance into the September 19<sup>th</sup> Junior Varsity Football Game to cheer with the Junior Varsity Cheer Team Game time – 7:00 pm.

## \*Registration after September 10th will not guarantee a "Clinic T-shirt"

NOTE: Family & friends attending the game will be required to pay the athletic entrance fee into the game. All participants must be accompanied by an adult for this event. \*\*Chippewa Valley Cheer Team and/or Coaches will not be responsible for supervision once the sideline performance is complete \*\*

REGISTRATION ENDS Friday September 11th.

Register online at: <a href="https://chippewavallevschools.ce.elevo.com">https://chippewavallevschools.ce.elevo.com</a>

Or in person to: Chippewa Valley Schools, Adults & Community Ed 19230 Cass Ave, Clinton Twp, MI 48038. Cash, check (checks made out *to Chippewa Valley Schools*), VISA, Mastercard are all acceptable payment methods. 20\$ fee on returned checks. All withdrawals are subject to an 8 dollar processing fee. Full refund through 9/11/2024. No refunds will be given after 9/16/2024. Payment is due in full at the time of registration. **Coaches cannot accept registration payments**.

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Return this stub with payment (836001-01) \$65 Return this stub with payment (836001-01)

## Chippewa Valley Cheer Clinic September 17th and 18th 5pm-7:00 pm

Participant	ts name:		D.O.B.:/2023-2024 grade:				
Parent nar	ne:	Phone number:					
Email:		Student's school:					
Address:		city:			Zip		
Method of payment: cash		check# credit					
VISA/master card#:				ехр	o. Date:/_		
Name of card holder:		signature:					<u>——</u>
T-shirt size	<b>:</b> :						
YS	YM	YL	AXS	AS	AM	AL	AXL