

SMS Spartan Cheer Team Membership Form

DUE March 5, 2018

Name _____

Grade Level (FOR NEXT YEAR) _____ School ID# _____

Parent / Guardian Name(s) _____

Address _____

Home Phone # _____ Parent Cell # _____

Emergency Contact Name and # _____

**Parents / Guardians - If you have Internet access, please provide an email address so that you can be added to The Spartan Cheer team address book and be included on mass emails that are sent out informing you of important events and updates*

Parent(s) email address _____

Other email that you want to be added: _____

I have read and understand the terms and conditions for attending Spartan Cheer Workshop Clinic April 2-4. I have read and understand the terms and conditions for attending Summer Cheer Camp in August. I understand that I may be penalized for not attending cheer camp, and I understand that I will forfeit a spot on next year's team roster by failing to participate in all three days of Spartan Cheer Camp.

Member Signature _____

Student cell phone: _____

Parent / Guardian Signature _____

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| Cheer Coach Use ONLY |
| Parent Meeting _____ |
| Cheer Workshop Clinic M ___ T ___ W ___ |
| Cheer Camp M ___ T ___ W ___ |