

## SPIRIT DAY CHEER CAMP Sat. Aug. 3, 2013 12-3pm

Show Off at 3pm

985-693-7109 www.alstarzacadmy.com \$25

Athlete Name:		
Mailing Address:		
Parents Name:	Cell #	
E-mail Address:		
	WAIVER	
in good health & capal harmless the ALSTAR	RZ Cheerleading Academy's Sprit Day Cheer Contense physical activity and the chance of injuriable of participating in this type of activity. I related the ALSTARZ and its staff permission to call for the Spirit Day CHEER CAM Sat. Aug. 3, 2013 12-3pm Show Off at 3pm 985-693-7109 www.alstarzacadmy.com	ry does exist. My child is ease and agree to hold y liability whatsoever. In or medical attention.
	\$20 Pre Registration \$25 at door	
Athlete Name:	Age:	
Mailing Address:		
Parents Name:	Cell #	
E-mail Address:		
	WAIVER	
Ι,	give my child,	, permission to

participate in ALSTARZ Cheerleading Academy's Sprit Day Cheer Camp. I understand that cheerleading involves intense physical activity and the chance of injury does exist. My child is in good health & capable of participating in this type of activity. I release and agree to hold harmless the ALSTARZ Cheerleading Academy and it's staff from any liability whatsoever. In case of emergency, I give ALSTARZ and its staff permission to call for medical attention.