

TMHS Cheerleader for a Day Fundraiser for Alzheimer's Association

Come join your Redmen Varsity cheerleaders for a mini clinic and game day experience. Learn sideline cheers and half-time routine. Enjoy a pizza party, cheer alongside Varsity cheerleaders and perform at half-time!

When: Saturday, October 6th from 11:00am-halftime at the game. Game starts at 1:30pm.

Who: Any child from K-8th grade. A parent or guardian must be designated to sign their child in and out of the program. Drop off is in the Ryan School cafe, pick up at Doucette Field inside main gate after half time.

Funds: All profit raised from the program will be donated to Alzheimer's Association (alz.org) Program is \$30 per child in advance and \$35 per child day of event, with a \$5 discount for more than one child. Includes a t-shirt, the child's admission to the game, water, and pizza.

What to wear: T-shirt, black leggings, and athletic shoes

How to register: Submit payment (cash or check made out to Tewksbury Cheerleading Invitational) and registration (no later than 9/30 to be guaranteed a t-shirt) to: 128 Pike St. Tewksbury, MA 01876

Questions: contact Senior Captain Jenna Wentworth at jennawentworth1@gmail.com

Registration

Cheerleader's Name _____

Grade as of Sept 2018 _____ Date of Birth ____/____/____

Email Address _____

Parent's Name _____

Emergency Contact Name/Phone #s _____

Cheerleader's T-- Shirt Size: YS YM YL YXL AS AM AL

Clinic Waiver

MUST BE COMPLETED BY A PARENT OR GUARDIAN

I, the legal parent or guardian of the undersigned cheerleader, understand, acknowledge, and agree that in consideration of being allowed to participate in Redmen Cheerleading Summer Clinic:

1. I waive any and all claims for injury or damage against the Redmen Cheerleading Cheerleader for a Day Clinic, their coaches, teammates or volunteers, which I may incur while participating in this program.

2. I assume the risk for any and all injuries or damage, which I may incur while participating in this program.

3. I grant permission for Redmen Cheerleading Cheerleader for a Day Clinic, to use any photographs, film, and videos of me for promotional purposes.

Parent/Guardian Signature: _____ Date: _____

All profit made from this program will be donated to Alzheimer's Association to help find a cure for the disease. If you have any questions, email Senior Captain Jenna Wentworth at jennawentworth1@gmail.com.

