

Reavis Cheerleader Kiddie Cheer Camp Registration Form

Camper's Name: _____

Parent or Guardian's Name: _____

Parent's Home phone: _____

Cell phone: _____

Child's age: _____ Grade: _____

Medical information that we should know about your child, such as asthma or allergies:

Emergency contact name and phone # (in case parent cannot be reached):

Permission Slip: My child has permission to participate in the Cheer Kid's Camp at Reavis High School. Also, I hereby grant the cheer coach or athletic trainer authority to secure medical care for my child in the event of a medical emergency when a parent or guardian cannot be contacted.

T-shirt order:

****T-shirts must be PRE-ORDERED with your registration. ****
Parents may purchase a t-shirt at an additional cost of \$10.00 per t-shirt

Check quantity and size:

_____ youth small	_____ Adult small
_____ youth med	_____ Adult Med
_____ youth large	_____ Adult Large
_____ youth XL	_____ Adult XL

Payment Information:

Payments can be given to a cheer member, coach or mailed to: Reavis High School
Attn: Katrina Arnold
6034 W 77th street
Burbank, IL 60459

*Walk in registrations are welcome, however we **cannot guarantee** t-shirt orders or sizes that day!

_____ Cash _____ Check (make payable to Reavis High School.)