

# 2017 RED WOLVES YOUTH CHEER CAMP



MONDAY JULY 17th - WEDNESDAY JULY 20TH, 2017  
4:00 PM - 5:30 PM CHS GYM  
GIRLS KINDERGARTEN THROUGH 5TH  
(times subject to change depending on enrollment)

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Clip here and save top section for the dates!

**\*Campers will receive a camp t-shirt,  
daily craft and a group photo\***

**COST: \$65** (BENEFITS CHS CHEER STUNT CAMP)

Campers will learn:

- Cheers
- Chants
- and a Half time dance!

WHAT TO WEAR:

- t-shirt
- shorts
- hair in a pony tail
- NO jewelry

Be sure to bring a water bottle with your name on it!

**Register by completing the form below and the emergency form on the reverse side of this flyer and return it with a check to the address at right.**

PLAYER NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ GRADE IN FALL 2017: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

EMAIL (optional): \_\_\_\_\_

YOUR SCHOOL: \_\_\_\_\_

T SHIRT SIZE (circle) Youth S M L Adult S M L XL

Order forms need to be received by July 1st, 2017 in order to guarantee t-shirt size.

Mail your registration to:

Red Wolves Boys Cheer Camp  
c/o Tracy Graves, Head Coach  
Cedarcrest High School  
29000 NE 150th St.  
Duvall, WA 98019  
*Questions? Contact Coach Graves*  
*@ (206)910-9218*  
*gravest@rsd407.org*

**Emergency Medical Treatment Authorization - Please Print Clearly**

Player Name \_\_\_\_\_

Parents/Guardian Name \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardians Work Phone \_\_\_\_\_

Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_

Family Physician or Health Care Provider \_\_\_\_\_

Physician/Health Care Provider Phone # \_\_\_\_\_

Preferred Hospital \_\_\_\_\_

Medical Conditions to be aware of \_\_\_\_\_

\_\_\_\_\_

If, in the event of serious injury, your family physician or health care provider is not available or is not located in the immediate vicinity and we are unable to contact a parent, does the coaching staff have your permission to seek medical attention from the nearest physician/health care provider? Yes \_\_\_\_\_ No \_\_\_\_\_  
If your answer is "no" please specify procedure you wish the coaching staff to follow: \_\_\_\_

\_\_\_\_\_

Participation in athletics can be a dangerous activity involving multiple risks of injury. Injuries can range from abrasions and bruises, to catastrophic injures. Careful consideration should be given to the risks and dangers associated with athletics before making a decision to participate.

*I/We, the undersigned, do hereby release, absolve, indemnify and hold harmless Cedarcrest High School, the Coaches, Player Coaches, Guest Coaches, and Volunteers from any liability during my/our child's participation in this basketball camp. I/We assume all risk and hazards incidental to my/our child's participation in this basketball camp.*

**Parent(s)/Guardian Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_