



CITY OF ARLINGTON CHEERLEADING SQUAD Summer 2009



Important League Information

Registration Dates: April 1-30*
Season Start Date: June 13
Registration Fee: \$80
Facility Card: \$12 per player (valid for one year)

Parents Meeting: Saturday, May 30, 12 pm @ MRC.
Please bring your cheerleader for uniform fitting.

All meetings are at
Meadowbrook Recreation Center (MRC)
1400 Dugan, Arlington 76010

- Age determination date is **September 1, 2008**.
- All Participants must have a valid Facility Card.
- Fee includes eight performances, uniform and award.

***Participants registering for the league after April 30 are subject to availability and will be charged a \$15 late registration fee.**

League Details and Description

Cheer Squad:

READY OKAY!!!! Squads are now forming to cheer for our youth basketball games each Saturday. Coaches will work with cheerleaders to learn chants, cheers, jumps and basic formations. If you haven't cheered before that's okay! Cheer Squad will practice once a week and cheer at a game each Saturday.



Refund Policy:

No refunds will be made unless leagues are cancelled by the Parks and Recreation Department.

Cheer Clinic & Tryouts

Saturday, June 6

10am - 12pm

\$15 per participant

Cheerleaders will learn basic chants, cheers, motions and jumps. Participants should wear comfortable clothing, athletic shoes and bring a bottle of water.

For additional league or clinic information call:

Elzie Odom Recreation Center (EORC)

1601 NE Green Oaks Blvd.

Phone: 817-459-6434 Return fax: 817-459-6448



City of Arlington Summer 2009 Cheer Squad (Barcodes: Cheer- 105526)

Please Print

Child's Name: _____ Age: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ School: _____

Parents' Names: _____ Child's Birthday: _____

E-mail Address: _____

Please circle one:

6-8 Cheer Squad

9-12 Cheer Squad

I hereby give permission for my child to enter a multi-purpose Recreation Center, unattended by the parent/guardian, and to engage in non-structured recreation and athletic activities. In the event my child is injured and I cannot be reached to make emergency medical arrangements or circumstances make it impossible for me to be reached, I hereby authorize a Parks and Recreation Department employee to take my child to a physician on call, or to the nearest emergency hospital. I covenant and agree, that for and in consideration of my child's participation in such activities, to indemnify and hold harmless the City of Arlington, it's employees, agents, sponsors and volunteers assisting in these activities, from any and all damages, claims or liability of any kind, whatsoever, from any injury or death to my child or damage to property, arising or resulting from my child's participation in these activities. I verify that all information on this form, including my child's date of birth is correct and accurate.

(Parent/Guardian Signature)

(Date)