

## Daniel Boone High School Cheerleaders

## Invite you to cheer with us on

FRIDAY SEPTEMBER 22<sup>ND</sup>, 2017

GAME TIME 7:00PM AT THE DANIEL BOONE HIGH SCHOOL FOOTBALL STADIUM

All cheerleaders are welcomed!

#### INFORMATION:

All cheerleaders are to plan to meet at the *High School Annex gym at 6:15 pm*.

The Participating Cheerleaders ONLY will get in free to the game

**Attire for Game:** cheerleading uniform, socks, sneakers, bloomers, hair pulled up and a wearing bow. If it is cold the cheerleaders are encouraged to wear black stretch pants and a cheerleading jacket or sweat shirt.

#### The cheerleaders will cheer on the track in following order:

- 1<sup>st</sup> Quarter of the Football Game: Kindergarten, 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> graders.
- 2<sup>nd</sup> Quarter of the Football Game: 4<sup>th</sup>, 5<sup>th</sup>, 6<sup>th</sup>, and 7<sup>th</sup> graders
- \*ALL cheerleaders who are not cheering during a particular quarter are to be sitting with their parents or the High School Cheerleading Coaches in order to ensure everyone's safety.
- \*Only High School coaches will be permitted on the track with the cheerleaders. Stunting will not be permitted on the track.
- \*Cheerleader pick up will be at the end of the high school track near the snack bar.

MEDICAL FORMS ARE DUE UPON ARRIVAL AT THE HIGH SCHOOL ANNEX GYM

WE LOOK FORWARD TO SEEING YOU! ◎

Any questions please contact:

Varsity Cheerleading Coach:

Kristen Malason

kmalason@gmail.com

### MEDICAL RELEASE FORM

September 22<sup>nd</sup>, 2017

# ALL PARTICIPANTS MUST COMPLETE AND RETURN THIS FORM SEPTEMBER INORDER TO PARTICIPATE!

Participant's Name:
Participant's Phone Number:
Grade of Participant:
Name of Parent/Guardian:
Emergency Contact Name and Number:
Insurance Company Name:
Insurance Company Policy Number:
Medical Treatment Waiver and Release Form:
I/We, the undersigned parent/guardian, do hereby authorize Daniel Boone High School Cheerleading and Daniel Boone School District to obtain medical treatment for my daughter/son for any injury or illness undergone during the October, 14 <sup>h</sup> 2016 Football game. I/We hereby hold Daniel Boone Cheerleading, Daniel Boone School District and representatives harmless in the exercise of this authority and forever discharge any and all rights and claims for injury and illness, which may arise now or in the future. I/We further acknowledge, understand, and agree that in participating in the Cheerleading there is a possibility of physical injury or illness by her/his participation. I/We assume full financial responsibility for such treatment.
Parent/Legal Guardian Signature:
Date: