



Cheerleading Session I Registration

- Cheerleading will be on Tuesdays from 4:30 to 5:00 from January 11th until February 8th.
- Ages 5 through 12
- Cost will be \$35
- Students can take the bus or get dropped off at the Community Center
- Pick up will be from 5:15 to 6:00 at the Community Center
- We will provide equipment, snacks, and transportation

Participant Name _____
Age _____ Grade _____ D.O.B. ____/____/____ Shirt size: _____
Guardian Name – Please Print _____
Guardian/Liability Signature _____ Date _____
Mailing Address _____
E-Mail Address _____
Home Phone _____ Work Phone _____
Cell Phone _____
Emergency Contact/phone# _____

Payment: Cheerleading costs a total of \$35. You must pay for all 5 weeks before your child's first day.

CREDIT CARD INFORMATION

Name on card: _____

Card Number: _____ Expiration: _____

Security Code: _____

Billing Address: _____

(City, State and Zip Code)

Authorization to charge card pursuant to approved payment plan: I hereby authorize the Town of Oak Creek to charge my credit card pursuant to the approved payment plan for Oak Creek Parks & Recreation Department camps and clubs.

Signature of Cardholder

Approved by Oak Creek Parks & Recreation: _____

PERSONAL RELEASE LIABILITY AGREEMENT

The undersigned acknowledges that CHEERLEADING is a potentially dangerous activity involving RISK OF PERSONAL INJURY, DEATH AND PROPERTY DAMAGE. I expressly understand and agree that neither the Town of Oak Creek, CO, a municipal corporation, nor any of their officers, agents, volunteers, assistants, or employees shall be held responsible or made the subject of any claim seeking to assess damages or liability for or arising from personal injury or property damage or loss of any other sort to myself or other person in whose behalf this form is now signed as a result of actual or proposed participation in the above named program and I hereby agree to indemnify and hold the Town of Oak Creek, their officers, agents, volunteers, assistants, or employees harmless on account of any such claim.

Child's Name: _____ Parent's Name: _____

Parent or Guardian's Signature: _____ Date: _____