



Durham Recreation Cheerleading Summer Camp 2016

***Open to students entering grades 3-8**

Participants will perform for parents and friends Friday!

CHEER

July 18-22, 2016

DANCE

JUMP

9-11:00 a.m.

STUNT

Strong Middle School
Durham

Mail this form and registration fee:

Durham Recreation
P.O. Box 428
Durham, CT 06422

Check Amount: \$_____

Check #: _____

**Registration fee \$75
includes bow and t-shirt**

PLEASE PRINT

Student Name _____ Grade ____ Gender ____ Shirt Size ____

Student 2 Name _____ Grade ____ Gender ____ Shirt Size ____

Parent/Guardian Name _____

Home Phone _____ Cell _____

Address _____

Emergency Contact _____ Phone _____

Please list any medical problems concerning your student, including allergies or medications:

I hereby give permission for the above student to participate in the Durham Recreation Cheerleading Camp, sponsored by the Durham Recreation Department. I certify that he/she is in good health. I have listed above any allergies, conditions and/or medications that the program personnel should be aware. I further authorize the Durham Recreation staff to act for me according to their best judgment in any emergency requiring medical attention in the event that I cannot be located. In case of injury, I understand that I am responsible for all financial liabilities.

Parent Signature _____ **Date** _____