



2007 MHS Football Cheer Camp

Sponsored by the MHS Athletic Booster Club

Under the instruction of the MHS Cheerleaders, learn to create a game time SPIRIT attitude! And then put your skills to test as you cheer the first half of a MHS Junior Varsity Football Game

MHS Chemics VS Bay City Western

- Instruction: Thur Sept 27, 2007 4:00 p.m. – 6:45 p.m.
- Performance: Game starts at 6:00 p.m. gates open at 5:30
- Program Fee: \$30.00 (includes Dinner, Sweatshirt, Pompons)
- Grades: Kindergarten thru 5th grade

Pre-Registration Required * * * Deadline September 23, 2007
(Tickets to the game must be purchased seperately)

To register, fill out Registration form and return with a check payable to MHS-ABC by September 23, 2007.

MHS ABC
c/o Debra Miller
712 Linwood Drive
Midland, MI 48640



Registration Form

Participant Name: _____

Parent(s) Name: _____

Street Address: _____

City: _____ Zip: _____ Phone: _____

Age: _____ School: _____

EMAIL TO CONFIRM REGISTRATION: _____

Shirt Size: Youth Small Youth Medium Youth Large
Adult Small Adult Medium Adult Large

Allergies: Yes No
If yes, details: _____

Is there any medical concerns or other information which would restrict your child from participating in any activities during this event?

Yes No
If Yes, details: _____

In the case of an emergency during the event a parent can be reached at _____ if unable to reach a parent, please contact the person identified below:

Emergency Contact: _____

Number: _____

Release and Indemnity:

The undersigned assumes all responsibility for any and all risk of damage or injury that may occur to the above named player as a participant in this Pom Camp. In consideration of such, the undersigned hereby releases and discharges the program and it's instructors from all claims, demands, right or causes of action present or future. We further agree that the participant has no medical problems and is in good physical health and that we will be responsible for all medical and dental claims and, or insurance.

Parent or Guardian Signature: _____ Date: _____

Mail To: MHS-ABC, C/O Debra Miller, 712 Linwood Dr, Midland, MI 48640