

Arapahoe High School Cheer

proudly presents the 2019 Mini & Junior CHEER CLINIC

Clinic: Saturday, October 5

Check in: 1:00-1:30pm
Clinic: 1:30-4:00pm
Pick up: 4:00pm



Cost: \$70

Includes long sleeved t-shirt, Sling Backpack, Poms, two hour clinic, snack, entrance to the Varsity game for 1 parent/adult and child participant and supervision until halftime!

Performance: Thursday, October 10

Arapahoe vs. Cherry Creek
Varsity Football Game at
Littleton Public Schools Stadium
199 E. Littleton Blvd. Littleton 80121
Check in: 6:30-7:00pm (at LPS Stadium)
at the mini cheer table

Arapahoe High School
2201 E. Dry Creek Road
Clinic to be held in the main gym &
auxiliary gym. Check-in for clinic at
EVENT ENTRANCE on the
west side of the school.

Ages for Clinic/Performance is K-8th
grade. A special routine will be taught
to our Junior Cheers in grades 6-8!

Performance at Half Time

Parent pick up child immediately after halftime
performance

Premier Spirit Package

- Includes leggings and hair bow \$20

Legging Sizes

- Youth S
- Youth M
- Youth L
- Adult XS
- Adult Small

Spirit Package

- Includes hair bow \$7

Long Sleeve T-Shirt Sizing

- Youth XS (4)
- Youth S (6-8)
- Youth M (10-12)
- Youth L (14-16)
- Youth XL (18-20)
- Adult Small

Total due including \$70 registration and optional spirit wear: \$ _____

To register, visit <https://docs.google.com/forms/d/e/1FAIpQLSecIbx30NW33gYuW9080VwLs-w2kMiM71MP9foYVATKTuAhWg/viewform>

Then send your check payment to the address below. You may also mail this completed form along with a check made payable to **AHS Cheers Booster Club** (please put your child's name in the memo field) and send to:

AHS Mini Cheer, % Hollie Hinton: 1652 E. Nichols Ln, Centennial, CO 80122

Questions? Email ahsminicheers@gmail.com

REGISTRATION DEADLINE is Monday September 16, 2019

Participant's Name _____ Parent's Name _____

Address _____ City _____ Zip _____

Home Number _____ Emergency Number _____ Email Address _____

School Attending _____ Grade _____

Indicate Free Clinic Shirt Size (see sizes on left): _____

Allergies: _____

I give my permission for my child to participate in the Mini-Cheers Clinic. I will not hold AHS cheerleaders, Coaches or Staff responsible for any injuries.

Signature of Parent or Guardian _____

Date _____