

EDMONDS-WOODWAY HIGH SCHOOL

EWHS JUNIOR CHEER CAMP



4 Days - \$100 *\$125 after June 21st

Where: Edmonds-Woodway High School

Dates: August 19th – August 22nd

- Monday August 19th 9:00am - 1:00 pm
- Tuesday August 20th 9:00am - 1:00 pm
- Wednesday August 21st 9:00am - 1:00 pm
- Thursday August 22nd 9:00am - 1:00 pm

Held by the
Edmonds-Woodway HS
Cheerleading Coaching
Staff and Cheerleaders

For Cheerleaders
Grades K-8

**Building Future
Warriors
Today**

To Register:
Mail the **completed form** (on back)
and a **check for \$100.00** payable to
Edmonds School District

to:
EWHS Cheer
c/o Coach Brianne Sturm
7600 212th St. SW
Edmonds, WA 98026

Participants in the EWHS Junior
Cheer Camp will learn and prac-
tice cheerleading skills, including
jumps, dances and cheers.

Please wear tennis shoes, sweats
or shorts, a camp T-shirt will be
provided.

This is an instructional camp open to
area residents. Parents should make
arrangements to pick up their child
at the end of each session.

For more information call:

(425) 431-4290

or email:

sturmb@edmonds.wednet.edu

**Edmonds Warriors
Junior Football
Cheer Team**

Details and registration at:
www.edmondswarriors.com



Grades K-8

Practice begins August 26th
Games on Saturdays starting Sept 7th

EWJF Cheer is run in coordination with
the EWHS Cheer Team

Assumption of Risk/Permission to Participate

As a parent or guardian of a student requesting to register for participation in the 2013 Edmonds-Woodway High School Cheer Camp sponsored by the Edmonds School District, I hereby acknowledge that I have read, understood, and agree to the following:

1. I acknowledge that football programs entail many risks of injury, even when played in an instructional clinic environment. These risks of injury include, but are not limited to, death, serious neck and spinal injuries (which may result in complete or partial paralysis), brain damage, serious injury to virtually all internal organs, bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system and serious injury or impairment to other aspects of the body, general health, and well-being.

(Parent initials)

2. I further certify that my child has no medical or physical conditions which could interfere with his/her safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

(Parent initials)

Select T-shirt size →

Shirt Size: **YS YM YL AS AM AL**
 (Circle one) Y = Youth A = Adult

Medical Information

The following special health problems should be noted: _____

In the event of an emergency, I wish the following person to be notified in case I cannot be contacted:

_____ Phone _____

Medical Release

In the event of an accident or illness, I understand that reasonable effort will be made to contact the parent/guardian immediately. However, if I am not available, I authorize the Edmonds School District to secure emergency medical care as needed.

Name of Preferred Doctor _____ Phone _____

Medical Insurance

I understand that I am assuming financial responsibility for medical expenses that may arise from my child's participation and that **the Edmonds School District requires but does not provide medical insurance for my child.** I certify that my child has current medical coverage under the following plan:

Health Insurance Carrier: _____ Plan Number (required): _____

All participants are required to have medical or student accident insurance. Student accident insurance is available through your school. Contact your school's main office, head coach, or school athletic trainer for information.

Although I understand that the Edmonds School District will make reasonable effort to provide a safe environment, I am fully aware of the special dangers and risks inherent in participating in this activity, including physical injury and/or death. Being fully aware of the risks, I hereby give

permission for _____ who attends _____ to
(Student) (School)

participate in the 2013 Edmonds-Woodway High School Cheer Camp, August 19-August 22, for the purpose of learning and practicing cheerleading skills, including jumps, dances and cheers in order to enhance skill and performance level.

Parent/Guardian Name _____ Home Phone _____
(please print)

Address _____ Work Phone _____

Parent/Guardian Signature _____ Date _____