

Summer Spirit Spectacular Youth Cheer Camp

Hosted by the

Delaware Valley High School Cheerleaders

Dates: Wednesday 8/4/21 – Friday 8/6/21

Location: DVHS Green Gym (use Pool entrance)

Cost: \$85 (includes a t-shirt) – Make checks payable to DVHS CHEER

Open to grades: K-6

Time: 9am – 1pm

Name of Participant: _____

Mailing Address: _____

Phone Number: _____ Alternate Number: _____

Age: _____ School: _____

2021-2022 Grade: _____ T-shirt size: YS YM YL AS AM AL

Please fill out the release form on the back of this sheet.
All information must be completed and signed before mailing to

DVHS CHEERLEADING
c/o J. Marchetti
252 Rte 6 and 209
Milford, Pa 18337

Questions?
Contact: Jen Marchetti marchettij@dvsd.org

*****All registration forms and payment must be postmarked by 7/12 to guarantee a t-shirt!***



*******Please complete the waiver on the back of this form.*******

WAIVER OF LIABILITY

I (parent or guardian), _____

Hereby waive and absolve Delaware Valley School District, the Delaware Valley High School Cheerleaders, and all divisions thereof any and all liability and responsibilities for injuries, sickness, accidents, and/or acts of God incurred during the participation and activities in the 2021 Summer Spirit Spectacular cheerleading camp by

Myself/my child _____ 2021-2022 grade _____.

I (parent or guardian), _____, do hereby acknowledge that myself/child

_____ has insurance coverage..... OR _____ has no insurance coverage (check one)

and I (parent/guardian) _____ accept financial responsibility for care and/or treatment

(myself/my child) _____ should need in case of an emergency during the 2021 cheerleading

camp. I agree not to hold Delaware Valley School District or any of its assigned representatives or agents

financially responsible for care and/or treatment need in case of an injury to the above named participant.

Cheerleading carries with it potential hazards. You / your child could fall, be knocked over, run into, or bumped; receive bruises, broken bones, concussion, and serious injury as a result of some sort of gymnastic and/or aerobic stunts practiced or performed as part of the cheerleading program.

In consideration of my signed release allowing my child/myself to participate in this DVSD event, I, intending to be legally bound, do hereby, my heirs, executor and administration, waive, release, and forever discharge any and all rights and claims for damage which I may have or which may hereafter accrue to me against the Delaware Valley School District, their directors, or their respective employees, office, agents, representatives, successors, and/or assignee, for any and all damages which may be sustained or suffered by me or my child in connection with my association with or participation in, or rising out of travel to/or return from the respective clinic site. In the event of injury/accident/sickness, DVSD officials and/or instructors are to contact the designated adult listed below.

I hereby give my permission for myself/my child to be photographed, videotaped, and or audio taped during any DVSD cheer activity. I further give my permission for such photographs, videotapes, and audiotapes to be used in print or broadcast media as deemed appropriate for promotion of DVSD cheerleading activities and for publicity surrounding participation in DVSD cheer events.

IN CASE OF EMERGENCY CALL:

Name: _____ Relationship: _____

Address: _____

Home Phone: _____ Doctor Name: _____

Insurance Company: _____ Policy Number: _____