

Future Freedom Falcons Cheer Clinic 2012

Learn cheers and perform with Freedom High School's Cheer Team during a varsity basketball game!
Proceeds benefit Freedom's cheer program.

Clinics: 4 to 6:30 pm, Wednesday and Thursday, February 8-9.

Perform: during half-time when Freedom's varsity basketball team hosts Heritage High School at 7 pm Friday, February 10.

Cost: \$50 - **Includes two-day clinic, performance t-shirt, pom-poms, snacks & waters**

- Kindergarten through 8th graders will be grouped by age and ability
- Freedom Cheer coaches and advisors will supervise clinic
- Parents welcome to observe, or may drop off and pick up participant

Write checks to 'Freedom High School Cheerleading,' add driver's license number and expiration date on memo line. Drop off with check at Freedom's student store, or mail to Sandra Torres, Freedom High School, 1059 Neroly Road, Oakley, 94561. **Reservation deadline to ensure a t-shirt in your size is Thursday, February 2.** For more information, call advisor Leslie Runzler on her cell (510) 304-2000.

Circle a t-shirt size: youth S M L adult S M L

Name of participant: _____

Address: _____

Parent name: _____ Phone: _____

School: _____ Age: _____ Grade: _____

Liability Release: For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I _____, as parent or legal guardian of _____, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in the above Event to be conducted by Freedom High School Cheerleaders. I, in my own behalf and on behalf of Minor, further agree to release and to hold harmless Freedom High School Cheerleaders, Freedom High School, Liberty Union High School District on whose premises the Event will occur from any and all liability whether caused by negligence of the Releases or otherwise for any claim, judgment, loss, liability, cost and expense (including, without limitations, attorney's fees and cost) arising out of or connected with the Event, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and / or death) that Minor may incur or sustain during the Event, all activities associated with the Event. I further expressly agree to indemnify and hold harmless Releases and Releases' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by Minor or by any other persons on the account of damages of any character resulting to Minor in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss or costs Releasees may have to pay as a result of any such action, claim or demand. I, in my own behalf of Minor, hereby warrant that I have read this Liability Release in its entirety and fully understand its contents. I, in my own behalf and on behalf of Minor, am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumptions of the risk of injury or illness. I, in my own behalf and on behalf of Minor, further acknowledge that nothing in this Liability Release constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian:

X _____ Date: _____