

# WOODLAND HIGH SCHOOL CHEER

## LIL' PACK CHEER CLINIC

HOME OF THE WOLFPACK



WHS CHEER IS EXCITED FOR YOUR CHILD TO PARTICIPATE IN OUR CLINIC!  
PRE-K - 6TH GRADE LEVELS

**CLINIC FEE: \$75**

Includes: Lil' Pack Cheer Shirt, Cheer Bow, Pom Poms, Daily Snacks

CASH APP: \$WHSPACKCHEER OR Bring fee Mondays in September to WHS 4:30-6:00

WHEN: **MONDAY, SEPT. 23- FRIDAY, SEPT. 27**  
4:30PM-6:30PM

GAME DAY PERFORMANCE: **FRIDAY, SEPT. 27**  
WHERE: **THE DEN (WHS FOOTBALL FIELD)**  
Performance is during the Pre-Game Show 6:30PM  
WHS vs. HAMPTON

EMAIL FORMS:

[amcqueen@henry.k12.ga.us](mailto:amcqueen@henry.k12.ga.us) and

[Tameca.Lewis@henry.k12.ga.us](mailto:Tameca.Lewis@henry.k12.ga.us)

**WOODLAND HIGH SCHOOL CHEER**

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Email forms to: amcqueen@henry.k12.ga.us Tameca.Lewis@henry.k12.ga.us



Name of participant: \_\_\_\_\_

Grade: \_\_\_\_\_

Age: \_\_\_\_\_

School: \_\_\_\_\_

Home address: \_\_\_\_\_

Parent/Guardian name & number: \_\_\_\_\_

Parent/Guardian name & number: \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency contact name & number: \_\_\_\_\_

Emergency contact & number: \_\_\_\_\_

Health Insurance name: \_\_\_\_\_

Group No: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Insurance Phone Number: \_\_\_\_\_

Allergies: \_\_\_\_\_

Youth T-shirt sizes (circle): S M L XL Adult T-shirt size (circle): S

*As the parent/guardian of the participant above, I understand there is physical activity involved in this event and hereby waive any claims against Henry County Schools, WHS, or the WHS cheerleaders, coaches, and volunteers for any injuries which may occur.*

Signature of Parent: \_\_\_\_\_

Date: \_\_\_\_\_