

## Cheer Camp TEAM REGISTRATION

School:				
Address:				
City:				
School Phone:	School	School Fax:		
Head Sponsor Name:				
Head Sponsor Phone:	Email:			
Assist. Sponsor Name:				
Assist. Sponsor Phone:	Email:			
SQUAD TYPE: Elementary	Junior High	High School	Collegiate	
LEVEL: Beginner	Intermediate	Advanced		
TOTAL # OF CHEERLEAD!	ERS: TOT	AL # OF MASC	OTS:	
PAYMENT:				
Day Camp: \$ x _	campers =\$			
Day Camp: \$ x_	sponsors =\$			
TOTAL	=\$			

Cash | Checks | Money order made payable to Sideline Spirit

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