

# AHS Mini Cheer Camp Registration Form

Camper Name: \_\_\_\_\_

Age: \_\_\_\_\_ Tshirt size: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent cell: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Allergies or special instructions: \_\_\_\_\_

\_\_\_\_\_ Check here if you are an employee of Athens City Schools. Please list email and school below:

I agree that the Athens High School Cheerleaders and/or the Athens City School System will not be held responsible for any injuries incurred as a result of participation during the AHS Mini Cheer Clinic. I grant permission for first aid or EMS to administer immediate treatment to my child should she become injured or ill during camp on dates: September 16-20, 2024.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

Contact: Tasia Farmer  
[tasia.farmer@acs-k12.org](mailto:tasia.farmer@acs-k12.org)

Mail Registration Forms & Checks to:  
AHS Cheerleading  
% AHS Cheer  
655 Highway 31 North  
Athens, AL 35611

Pay online:  
[www.acs-k12.org/ahs](http://www.acs-k12.org/ahs)