

# BUCCADEAR DRILL TEAM CLINIC

High School Auditorium

Saturday, January 9, 2016

9:00 AM - 2:00 PM

Age: 4 yrs - 8<sup>th</sup> grade

What to wear: comfortable shorts, t-shirt, and tennis shoes

Show-off for parents: 2:00 PM-- High School Auditorium

Early Registration Fee (on or before Thurs. Jan. 7<sup>th</sup>):

\$30 per child, \$25 per additional sibling.

Late Registration: Jan. 8<sup>th</sup>-Jan 9<sup>th</sup>--\$40 per child; \$35 per additional sibling.

Registration at the door: (Begins at 8:45 AM)

\$40 per child, \$35 per additional sibling.



**Refunds may be given (less cost of clinic shirt), with notice, prior to the day of camp.**

**\*\*All Checks will be held until January 18<sup>th</sup>, 2016\*\***

Each participant will receive a clinic t-shirt and may perform at the EC Follies on **Monday, Jan. 18<sup>th</sup> 2016.**

Lunch: Choice of chicken nuggets or grilled cheese sandwich, chips and a drink. If your child's diet requires something other than what is being served or they would rather something else, please send a sack lunch marked with their name **in the morning.**

PLEASE FILL OUT THE INFORMATION BELOW AND RETURN IT WITH YOUR PAYMENT IN A SEALED ENVELOPE TO YOUR CHILD'S HOMEROOM TEACHER, or Principals Office **BY Jan 7<sup>th</sup>.**

Make checks payable to ECHS Drill Team

[Mayeux@eastchambers.net](mailto:Mayeux@eastchambers.net) for additional information

Name of participant: \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Lunch: \_\_\_\_\_ Chicken Nuggets \_\_\_\_\_ Grilled Cheese \_\_\_\_\_ Homeroom Teacher \_\_\_\_\_

Please List any food allergies: \_\_\_\_\_

Contact:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Circle T-shirt size: Childs Size: Small Medium Large

Adult Size: Small Medium Large X-Large

Paid \$ \_\_\_\_\_

Pd Ck# \_\_\_\_\_

## **Parent Must Sign Below:**

I allow my child to attend the Drill Team Clinic and I assume all liability for injuries or damages that may occur to my child as a result of her participation. I understand that the District, its Trustees, employees, and agents are not waiving any sovereign or governmental immunity that it or they have under Texas law. I have read and understand this release and sign it voluntarily and with full knowledge of its significance.

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date