

Mail this FORM, FULL PAYMENT, & each athletes WAIVER & RELEASE OF LIABILITY form ONE MONTH prior to the clinic you are attending.

B² CHEER & DANCE

PO BOX 22477

HOT SPRINGS AR 71903



B² CHEER & DANCE ONE DAY CLINICS 2018

ONE DAY CLINIC ENROLLMENT FORM

School/Squad Name _____

Squad Type (Check One) _____ CHEER _____ DANCE

Coach/Contact Name _____ School Telephone _____

Coaches E-Mail _____ Cell Phone _____

PLEASE SELECT THE CLINIC DATE & LOCATION:

_____ Northwest Arkansas Stunt & Pyramid Clinic

Saturday, May 5, 2018 at Springdale Har-Ber High School (Springdale, AR)

Coaches Check In: 9 - 9:30 a.m. Clinic: 9:30 a.m. - 12:00 p.m.

_____ Central Arkansas CHEER and DANCE Clinic & Bonding Day

Saturday, April 28, 2018 at Magic Springs Theme Park (Hot Springs, AR)

*Central Arkansas Cheer & Dance Clinic and Bonding Day includes 2 1/2 hour clinic, buffet lunch, and admission ticket to Magic Springs Theme & Water Park. Coaches Check In: 9 - 9:30 a.m. Clinic: 9:30 a.m. - 12:00 p.m. Buffet Lunch: 12:00 - 12:30 p.m. Theme Park: 12:30 p.m. until ...

_____ Northeast Arkansas Stunt & Pyramid Clinic

Sunday, April 29, 2018 at Valley View High School (Jonesboro, AR)

Coaches Check In: 1:30 - 2:00 p.m. Clinic 2:00 - 4:30 p.m.

Confirmation Email will be sent to coach/contact person listed above once ALL PAPERWORK and FULL PAYMENT is received

Non-refundable/transerable PAYMENT is due ONE MONTH prior to your clinic in order to register.

We are enclosing the following payments:

Northwest or Northeast Arkansas Clinic _____ at \$20.00 each = \$ _____

Central Arkansas Clinic & Bonding Day _____ at \$55.00 each = \$ _____

Central Arkansas Clinic Coaches Fee _____ at \$35.00 each = \$ _____

SCHOOL CHECK # _____ TOTAL DUE \$ _____