

# 2019 Little Ravens Cheerleading Camp



## ***When***

July 22<sup>nd</sup> - 24<sup>th</sup> from 9:00am-1:00pm

*Registration/ Check-in at 8:00am on July 22<sup>nd</sup>*

**\*SHOWCASE FOR PARENTS\***

July 24<sup>th</sup> at 12:00pm

## ***Where***

Westchase Recreation Center  
9791 Westchase Drive, Tampa FL 33626

## ***Cost Per Cheerleader***

\$60

**\*Early Registration Special - \$50\***

*Register before July 15<sup>th</sup> and save \$10!*



Little Ravens Cheer Camp is for participants entering grades K-6<sup>th</sup>. Camp includes 3 days of instructions (Cheers, Chants, Dance & Stunts), an Alonso Cheer T-shirt, a Cheer Bow, and lunch on Monday & Tuesday. Cupcakes will be served following the Parent Showcase. Participants must bring their own water bottle. Reserve your child's spot TODAY by returning payment and completed registration form to the Westchase Recreation Center. Registration fee can be paid via cash or check payable to Alonso Booster Club. For credit card payment, visit [Little Ravens Cheer Camp](#) (\$5 service fee applied).

If you have any questions, please contact Coach Ann at [Alonsohscheer@gmail.com](mailto:Alonsohscheer@gmail.com).



**HOSTED BY**  
Westchase Recreation Center Hillsborough County Parks & Recreation  
and  
Alonso High School Cheerleaders





## Alonso High School Cheer Clinic Registration Form

### General Information

Participant's Name \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_ T-Shirt Size \_\_\_\_\_

Parent/Legal Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Work Number \_\_\_\_\_

Email \_\_\_\_\_

### Emergency Information

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact Number \_\_\_\_\_

### Medical Information

Allergies/Medical Conditions \_\_\_\_\_

Is the participant covered by family medical/hospital insurance?  Yes  No

Carrier Name: \_\_\_\_\_ Policy Group # \_\_\_\_\_ Phone # \_\_\_\_\_

Name of Physician \_\_\_\_\_ Phone \_\_\_\_\_

### Additional Information

My child can have their picture taken for further program advertisement. Check: yes \_\_\_\_\_ no \_\_\_\_\_

Who is authorized to pick up my child:

1. \_\_\_\_\_

3. \_\_\_\_\_

2. \_\_\_\_\_

4. \_\_\_\_\_



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