

Glen Rose Cheer Mini Spirit Clinic



What?

- Participants will learn a cheer, chant & dance at an after-school clinic and then perform it at a Junior High Football game!

Who?

- Hosted by Glen Rose Senior and Junior High Cheer Teams for any student in grades pre-k through 4th grade!

When?

- Clinic - Tuesday, October 3rd immediately after school until 6:00 in the Old Gym
 - (If weather permits we will take the participants to the field at the end of the clinic to run through the performance. If we are able to do this you will pick your child up at the football field.)
- Performance - Thursday, October 5th at halftime of JH Football game vs. Bismarck

How much?

- \$35 - Please make checks payable to *Glen Rose Cheer*.

Need more info?

- Contact Mrs. Stanley or Mrs. Chaney via e-mail
mstanley@grbeavers.org mchaney@grbeavers.org

The registration form and money must be returned by **Monday, September 25th by NOON** to ensure shirts for performance.



Send in an envelope labeled:

Mini Cheer Clinic - Stanley OR Chaney (high school)

Transportation note

Prek & Kindergarten students must have a parent bring them to the old gym for practice on Tuesday, October 3rd. 1st-4th graders must have a note to stay after on October 3rd for the clinic.

Practice Schedule *tentative*

3:00 - Check-in in the Old Gym

Change & eat snack if needed.

3:30 - All together for warm-up and motion review

3:45 - First rotation of cheer, chant, dance

4:05 - Second rotation of cheer, chant, dance

4:25 - All together jump class

4:35 - Water break

4:45 - Third rotation of cheer, chant, dance

5:05 - All together motion/jumps/material review

6:00 - Pick up your child in the Old Gym (*or field if weather permits*)

**You are welcome to stay and sit in the bleachers during the clinic.*

Have students wear comfortable clothing and tennis shoes that they can move in.

***Snacks** - We will provide a small snack & water fountains are available in the gym. If you would like to send something else to eat/drink with your child, that will be fine.

Glen Rose Cheer Mini Spirit Clinic

Name: _____

Grade: _____

Teacher: _____

Parent's name: _____

Emergency Number: _____

Allergies or other important information: _____

Shirt size: **YXS** **YS** **YM** **YL**

(circle one)

AS **AM** **AL**

Payment method(\$35): Cash Check # _____