



**Join the CVHS
CHEERLEADERS
for some holiday fun!**

**Saturday, December 16*
9:00 am – 12:00 pm**

**Good Hope Middle School Gym
451 Skyport Rd, Mechanicsburg
*Snow date is Sunday, December 17**

**Like CUMBERLAND VALLEY
CHEERLEADING on Facebook
FOLLOW US ON TWITTER @cvcheerleading**

Holiday CHEER Clinic

**Get your holiday shopping done while your children attend the Holiday Cheer Clinic
supervised by the CVHS Cheer Coaches and the CVHS Varsity Cheerleaders**

Clinic Details

- For children ages 4 and older; please bring a labeled water bottle
- Wear comfortable athletic clothing in your favorite holiday colors and sneakers
- Registration fee payable to CVCB is \$25 for 1st child; \$20 for additional siblings
Registration is due by Saturday, Dec 9; fee includes Holiday Cheer Clinic shirt
You may either mail in the registration form with the payment to the address at the bottom or.....
if your child is currently a CVYCA cheerleader, she may give the registration to her team advisor
- Drop-off/check-in is between 8:30 and 9:00 a.m. at the Good Hope Middle School Gym
- Learn cheers, dance, jumps and conditioning drills, fun games
- Brief parent showcase at 12 noon



The talented high school cheerleaders, who are the 4-time PIAA State Champions and 7-time District 3 Champions, will host a Holiday Cheer Clinic at Good Hope Middle School on Saturday, December 16 from 9:00 am to 12:00 noon. This is a wonderful opportunity for children, ages 4 and older, to learn more about cheerleading for a \$25 fee (additional siblings \$20 each). The fee will include a full morning of instruction (jumps, motions, stunts, chants, and dance), holiday fun, snack and Holiday Cheer Clinic shirt.

**Please cut here. Mail with payment to CV CHEER CLINIC, 9 Jamestown Square, Mechanicsburg PA 17050
If your daughter is currently cheering for CVYCA, please give the registration and payment to her advisor.**

Registration ONE FORM FOR EACH CHILD PLEASE

Child's Name _____ Age as of 8/31/2017 _____ Grade _____

School _____

Circle T-Shirt Size: **YXS** **YS** **YM** **YL** **AS** **AM** **AL**

Corresponding Sizes: (4-6) (6-8) (10-12) (14-16)

Parent Name _____ Parent Cell Number _____

You do not need to be a cheerleader, but if you are, please indicate (circle) the program -

CVYCA

Other _____

Not a cheerleader, which is fine

Please return with payment by Saturday, Dec 9 to:

Mail to:

Make checks payable to:

Questions:

Child's Team Advisor or

CV CHEER CLINIC, 9 Jamestown Sq, Mechanicsburg, PA 17050

CVCB (Cumberland Valley Cheer Boosters)

Send text to Coach Kristi Shaffner 717-443-3769