

**Mark your calendars for**  
**SFYAL Summer Cheer Camp!**

The Spring-Ford High School Cheerleaders will be running the camp  
for our Spring-Ford Youth Cheerleaders!

Camp Details:

- Camp is open to all registered cheerleaders
- 2 day camp (9:00-3:00 each day)
- August 10, 2017 - August 11, 2017
- Held at Christ's Church of the Valley (Movie Church) 1560 Yeager Road, Royersford, PA 19468 in the main Church building
- Cheers/ chants/ dances/ stunts
- Cost for Cheer Camp is \$60.00 per girl
- Each participant will receive a T-Shirt
- Please register by July 26, 2017 to ensure your spot in camp
- Make checks payable to Tara Yurko

**Please sign up to ensure your spot in the camp. If you have any questions  
please contact Tara Yurko at 610-715-1137 or [tmey9@hotmail.com](mailto:tmey9@hotmail.com)**

# Cheer Camp Information!!

The Spring-Ford High School Cheerleaders will be running the camp  
for our Spring-Ford Youth Cheerleaders!

## **Camp Details:**

- Camp is 9:00 – 3:00 Thursday & Friday August 10th & 11th  
**(Please come any time after 8:45 to sign in. Please make sure you arrive promptly to pick-up your daughter at 3:00.)**
- You must pack a lunch on both days.
- Please pack a Water bottle with your daughter's name on it.
- **SNEAKERS ONLY!!!! NO JEWELRY!!!!!!!!!!!! WEAR COMFORTABLE CLOTHING!!!!**
- Please have hair pulled back and away from your face.
- Camp will be held at Christ's Church of the Valley (Movie Church) 1560 Yeager Road Royersford, PA 19468 in the main Church building
- On Thursday, we will have Kona Ice at camp. Each girl will receive a small Kona Ice or ice cream novelty. On Friday, we will have Philly Soft Pretzels.  
PLEASE LET US KNOW IF YOUR DAUGHTER HAS AN ALLERGY THAT WOULD PREVENT HER FROM HAVING THESE ITEMS.
- On Friday, the girls will put on a display of what they learned at camp.  
**Please come at 2:45 so that you can watch all their hard work.**
- **Please register by July 26, 2017**
- **Cheer camp cost is \$60.00 Please make checks payable to Tara Yurko**

We look forward to seeing you all at the camp

**If you have any questions please contact Tara Yurko at 610-715-1137 or  
tmey9@hotmail.com**



## Registration Form

### Spring-Ford Youth Cheerleading Camp

August 10th & August 11th

Christ's Church of the Valley

1560 Yeager Road Royersford, PA 19468

9:00 am - 3:00 pm

**\$60.00 Per Cheerleader**

NAME: \_\_\_\_\_ AGE \_\_\_\_\_

GRADE IN 2017 \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PLEASE CIRCLE WHAT LEVEL YOUR DAUGHTER IS SIGNED UP FOR THE 2017 SEASON

( FLAG, KNEE HIGH, MIITES, MIDGETS )

***SHIRT SIZE : YOUTH: YS, YM, YL ADULT- SM, Med, LG, XLG ( PLEASE CIRCLE ONE)***

**Please send your payment (checks payable to Tara Yurko) along with the registration form and medical waiver form by July 26, 2017 to:**

**Tara Yurko**

**36 Wensel Circle**

**Schwenksville, PA 19473**

**Any questions please contact Tara Yurko at: [tmey9@hotmail.com](mailto:tmey9@hotmail.com)**

# **SPRING-FORD YOUTH CHEER CAMP**

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## **Medical Treatment and Liability Form**

**EACH PARTICIPANT MUST HAVE A COMPLETED RELEASE FORM ON FILE PRIOR TO THE START OF CHEER CAMP; PARTICIPANTS WITHOUT A MEDICAL FORM WILL NOT BE ALLOWED TO PARTICIPATE IN THE EVENT.**

I \_\_\_\_\_ the undersigned parent or guardian, do hereby grant permission for daughter/son

\_\_\_\_\_, and hereafter shall be referred to as "participant", to partake in the event(s) sponsored by Spring-Ford Youth Football and Cheer.

In order that the participant may receive the necessary medical treatment in the event of an injury or illness, I hereby release the Spring-Ford Youth Football and Cheer Organization and Coaches and Spring-Ford School District, Spring-Ford High School Cheerleading Coaches, Spring-Ford High School Cheerleaders, Parent Association, Athletic Department, facility, Christ's Church of the Valley and all representatives from any liability associated with the exercise of this authority. I further acknowledge and agree that in taking part in the above named event, there is a possibility of physical illness or injury by participating. I authorize Spring-Ford Youth Football and Cheer and Spring-Ford High School Cheerleading and Spring-Ford High School Cheerleading Coaching staff to obtain necessary medical treatment for the Minor and hereby, in my own behalf and on behalf of the Minor. I further agree to hold harmless, Spring-Ford Youth Football and Cheer and Spring-Ford School District, including the parent association, directors, coaches, staff, athletic directors and Christ's Church of the Valley and all facilities in which the event(s) is held for any injury or illness incurred by participant during the course of the event.

Please list below any medication to which the participant is allergic or is currently taking. If participant is under medication, please check to make sure he/she brings his/her medication and that he/she takes the prescribed dosage.

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By signing below both I and participant verify that I am the parent or guardian of the participant named above, that I have read and understand the conditions of this medical release form. I further acknowledge that I am fully aware of the dangerous nature of the sport my child is partaking in and will hold only myself liable for any resulting illness or injury (minimal, serious or catastrophic)

Participant's Name: \_\_\_\_\_

Participant's Signature & Date: \_\_\_\_\_

Parent's Signature & Date: \_\_\_\_\_