Want to be a "USC Jr. Song Girl" and perform at the halftime of a USC Basketball game?

USC Song Girls are hosting a Cheer and Dance Clinic for girls age 4-17 years old. Following the clinic, perform at the USC Men's Basketball game vs. Stanford in the Galen Center. Come learn elite cheer and dance techniques and show them off!

When: Saturday, January 18th

Check in begins @ 12:30pm Clinic from 1:00 pm – 2:30pm

Game: 3:30 pm (perform at halftime)

Where: Clinic Location: USC Lyon Center

Game/Performance: USC Galen Center

Fee: \$120.00 per student (must pre-register)

(Fee includes: Clinic instruction, "USC Jr. Song Girl" T-Shirt, One Participant ticket and One Adult Ticket to the basketball game.)

*** Additional tickets are available for purchase at \$15/each prior to clinic. Please include order and payment with registration.

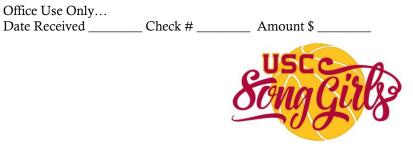
*For groups of 10+ contact Lori for potential discount



Registration Form

Please Print Neatly...

Dancer Name:	Age:
Parent Name:	
Home #:	Cell # :
Home Address:	
City, State, Zip	
Email:	
Referred by (team or school	ol):
Please indicate Cheer/Dance Exp	perience
Beginning Intermediate	e Advance
Please indicate T-Shirt Size	
Child S Child M	_ Child L/Adult S Adult M
**********	****************
Please make checks p	payable to: USC Song Girls \$120.00
Please rem	ait this form along with checks to:
	ersity of Southern California
	Lyon University Center
Los	s Angeles, CA 90089-2500
	Attn: Mike Munson
	Lori Nelson
Registration	n Deadline: Friday, January 17th



Agreement of Compliance

Medical Treatment, Liability Release, and Appearance Agreement

Coordinator/Coach/Advisor/Parent: An agreement of compliance must be read and signed for each member on your team in order for her to participate in the USC Jr. Song Girls Clinic.

Participant's Name:	School/Group
Home Address:	City/State/Zip
Home Telephone	Date of Birth
Parent's Name	Day Phone
Insurance Company	Policy #
If parent cannot be reached, please contact	Phone
Have you had any serious illness, surgery or injury?	If yes, please describe and when
Do you have any medical problems or allergies that m	nay interfere with this camp/clinic?
Describe the problem or limitations	
Do you have medication for this, with you? Please de	scribe
arising out of and inherent to the activity taking place at this event. In rights and/or causes of action of any kind, including any and all claims to University of Southern California, agents, employees and instructors I hereby agree to release "USC Jr. Song Girls Clinic" and hold "USC Jr.	nited to cuts, sprains, broken bones, and/or catastrophic injury) associated with, recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all of negligence, arising as a result of such activity from which liability could accrue is (hereinafter collectively referred to as "USC Jr. Song Girls Clinic"). The song Girls Clinic harmless of all liability, and hereby acknowledge that I ical injury arising out of active participation in this camp/clinic on behalf of the
I am aware that this is a release of liability and acknowledgment of my voluntarily and of my own free will in exchange for the privilege of parti	voluntary and knowing assumption of risk of injury. I have signed this document cipation.
video tape or photography taken during this event. I hereby grant "USI television networks and all other commercial exhibitors the exclusive rison/daughter's name, face, likeness, voice and appearance as part of	sterial about their program. I understand that my son/daughter may be included in C Jr. Song Girls Clinic", its successors, assignees, licensees, sponsors, any ght to photograph and/or video tape my son/daughter and further to utilize my the event, and in advertising and promotion of the event, without reservation or Its Clinic" is under no obligation to exercise any of its rights, licenses and privileges
If I am a minor, my parent and/or legal guardian has signed this docum described above and has acknowledged that I am knowingly and volun	nent releasing "USC Jr. Song Girls Clinic" from any and all such liability ntarily assuming all risk of injury inherent to this activity/camp.
complete and correct. I have completely read and understand the	e in the USC Jr. Song Girls clinic. I warrant the above information is above release information. I hereby authorize the camp director or their t. I further release University of Southern California and clinic staff of all
Parent/Guardian Signature:	Date: Rev. 11/11