

**Starting Wed. Nov. 17th  
4:00 PM to 5:30 PM**



# **CDCPS CHEERLEADING**

- **Team will meet Wednesday and Thursday's in December and days will change when the Basketball season begins in January.**
- **Cheerleaders will cheer at all home games, and potentially Charter School Cup.**

*Game days cheerleaders will ride the bus with the Basketball Team and cheer for the either first game or both games.*

*Athletic Fee: \$70*

Practice will be held at CDCPS  
Games are at the Wetherbee School in South Lawrence

## Community Day Charter Public School Spartans



Jason Lahaye, Athletic Director  
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### CDCPS Athletic Department *Cheerleading Permission Form*

Name \_\_\_\_\_ Grade \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Cell phone \_\_\_\_\_  
Parent/Guardian's Name \_\_\_\_\_  
Emergency Contact \_\_\_\_\_ Telephone \_\_\_\_\_ Cell phone \_\_\_\_\_  
Family Doctor \_\_\_\_\_ Telephone \_\_\_\_\_  
Family Medical Insurance \_\_\_\_\_ Policy No. \_\_\_\_\_  
Allergies (if any) \_\_\_\_\_

I understand there is an inherent risk in playing sports and the range of injury can be minor to severe. It is further understood that in case of injury, the school is responsible only for first aid treatment. If my son/daughter does suffer an injury that you give permission to the school to seek medical attention. I also understand that all equipment issued is property of the Community Day Charter Public School and is to be returned within 24 hours of the season close or I will assume the current replacement cost. To my knowledge, my son/daughter have not been treated for any pre-existing medical condition that could be aggravated by participating in interscholastic athletics.

I/We also give permission for my/our child to be transported to and from any athletic event. I understand the department policy will be to provide transportation by school bus or van, but in the event a bus or van is not available, private transportation may need to be used. These vehicles will be driven by responsible adults (parents of athletes or coaches), and they cannot be held responsible for any accident or injury that might occur.

In addition, we acknowledge that Community Day Charter Public School does not always provide transportation to all games and therefore, I may be required to arrange for transportation. Not all CDCPS athlete events require transportation.

I/We are aware all athletes must meet all academic and behavioral requirements of CDCS to remain in good standing on CDCPS teams. Any student that does not meet those requirements may be suspended from practices and games due to not meeting those requirements. In certain situations, dismissal from the team could result.

Finally, I am aware that the athletic fee for the Cheerleading is **\$70**.

I have read the above requirements and the Information provided, understand and agree to their terms and will help my son/daughter to carry out his/her responsibilities as a CDCPS student/athlete.

\_\_\_\_\_ has my permission to participate in CDCPS Athletics for the 2010-2011 seasons.

Parent Signature \_\_\_\_\_