



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

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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. Oregon State in the New Galen Center.

**When:** Saturday, February 21, 2009  
Clinic from 1:00pm – 2:30 pm  
Game: 4:00 pm (perform at halftime)

**Where:** Clinic Location: USC Lyon Center  
*(Please meet in Lyon Center on USC Campus. Enter from Gate # 5)*  
Game/Performance: The Galen Center

**Fee:** \$120.00 per student (must pre-register)  
Fee includes: Clinic instruction, “USC Jr. Song Girl” T-Shirt, 2 game tickets. Participants need a ticket to enter arena. Additional tickets may be available on a limited basis. Cost \$20/ticket.

Come learn a cheer and dance routine at the clinic and perform at the USC Basketball Game! Jr. Song Girls will wear the Jr. Song Girl t-shirt and a skirt or pants at the performance.

*Don't miss this opportunity!!! Space Limited!!!*

**For more info call: 213-740-8120**



# Registration Form

*Please Print Neatly...*

**Dancer Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Parent Name:** \_\_\_\_\_

**Home #s:** \_\_\_\_\_ **Cell # :** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Email :** \_\_\_\_\_

**Referred by (team or school):** \_\_\_\_\_

*Please indicate Cheer/Dance Experience...*

**Beginning** \_\_\_\_\_ **Intermediate** \_\_\_\_\_ **Advance** \_\_\_\_\_

*Please indicate T-Shirt Size...*

**Child S** \_\_\_\_\_ **Child M** \_\_\_\_\_ **Child L/Adult S** \_\_\_\_\_ **Adult M** \_\_\_\_\_

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*Please make checks payable to: **USC Song Girls \$120.00***

Please remit this form along with checks to:  
**University of Southern California**  
**Lyon University Center**  
**Los Angeles, CA 90089-2500**  
**Attn: Justine Gilman**

**Registration Deadline: February 15, 2009**

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Office Use Only...

Date Received \_\_\_\_\_ Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_

# 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 may interfere with this camp/clinic? \_\_\_\_\_

\_\_\_\_\_

Describe the problem or limitations \_\_\_\_\_

Do you have medication for this, with you? Please describe \_\_\_\_\_

\_\_\_\_\_

I understand that there are risks of physical injury (including but not limited to cuts, sprains, broken bones, and/or catastrophic injury) associated with, arising out of and inherent to the activity taking place at this event. In recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all rights and/or causes of action of any kind, including any and all claims of negligence, arising as a result of such activity from which liability could accrue to University of Southern California, employees, and instructors (hereinafter collectively referred to as "USC Jr. Song Girls Clinic").

I hereby agree to release "USC Jr. Song Girls Clinic" and hold "USC Jr. Song Girls Clinic" harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in this camp/clinic on behalf of the participant.

I am aware that this is a release of liability and acknowledgment of my voluntary and knowing assumption of risk of injury. I have signed this document voluntarily and of my own free will in exchange for the privilege of participation.

I understand that "USC Jr. Song Girls Clinic" produces promotional material about their program. I understand that my son/daughter may be included in video tape or photography taken during this event. I hereby grant "USC Jr. Song Girls Clinic", its successors, assignees, licensees, sponsors, any television networks and all other commercial exhibitors the exclusive right to photograph and/or video tape my son/daughter and further to utilize my son/daughter's name, face, likeness, voice and appearance as part of the event, and in advertising and promotion of the event, without reservation or limitation. In granting this license, I understand that Pop Stars pro is under no obligation to exercise any of its rights, licenses and privileges herein granted.

If I am a minor, my parent and/or legal guardian has signed this document releasing "USC Jr. Song Girls Clinic" from any and all such liability described above and has acknowledged that I am knowingly and voluntarily assuming all risk of injury inherent to this activity/camp.

**The above named student has my permission to attend/participate in the USC Jr. Song Girls clinic. I warrant the above information is complete and correct. I have completely read and understand the above release information. I hereby authorize the camp director or their agent to act in my behalf to provide emergency medical treatment. I further release University of Southern California and clinic staff of all liabilities associated with my child's attendance at the clinic.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Rev. 12/05