

St. Thomas More girls in grades K through 5th can join the STM Pep Squad. This after-school program meets once a week from 3:30 – 4:30 p.m. A schedule of the practices will be provided next week. Participants learn cheer skills including jumps, motions and dance.

All those interested should complete the attached release and participation form. The purpose of our Pep Squad is two-fold; motivate the teams they're supporting and promote enthusiasm amongst our fans. Pep Squad members in conjunction with our St Thomas More Cheerleaders will participate in selected football, soccer, volleyball, baseball, basketball games and school assemblies.

Uniforms: St. Thomas More will provide Pep Squad t-shirts, hair ribbon, and pom poms; ****Girls will wear black shorts**.

Games: Regular season football games are held on Monday or Wednesdays starting September 18th through the second week of October. All home games will be played at St. Thomas More.

Release Form: All participates will be required to complete this form (and return to the school office, ATTN: Mrs. Felton).

Fee: \$55 per girl – this will cover the cost of t-shirts, ribbon, and pompoms.

Coordinator: Ms. Cassie Noeker



I hereby give my permiss	sion for	(student)
to participate in St. Thon	nas More Parish School Pep Squad. Further, I aut	horize the
school to provide emerg	ency treatment of an injury to, or illness of my ch	ild, if
qualified medical person	inel consider treatment necessary. The authoriza	tion is
•	be reached and a reasonable effort has been mad	
,		
Please Print		
Date	Parent or Guardian	
Address	Phone	
Family Physician	Phone	
	ons (e.g. allergies or chronic illnesses)	
rie-existing medical condition	ons (e.g. allergies of chronic lintesses)	
Alternate contact in case of	emergency: Name	
Phone	Relationship to student	
	Policy Carrier	
Policy Number		
My child and I are aware t	that participation in the St. Thomas More Parish Sch	nool Pep
•	dous activity. I assume risks associated with partic	•
<u> </u>	not limited to falls, contact with other participants, o	
	s associated with the sport. All such risks to my chi / me. I understand this Informed Consent form and a	
conditions on behalf of my		agree to its
	Date	
Parent's/Guardian's Signa	nture Date	