**One Day Cheer / Dance Clinic Request for Credit Form**



Fax: 573-875-1450 Phone: 573-875-4880

Please complete the information below, scan and email to [davine@mshsaa.org](mailto:davine@mshsaa.org), no later than

**June 17, 2022** in order to receive a credit for the One-Day Cheer or Dance Clinics.

* School Name: Click here to enter text.
* Address: Click here to enter text.

City Click here to enter text. Zip Click here to enter text.

* Type of Clinic:  Cheer  Dance
* Date of Clinic Click here to enter text. Site Click here to enter text.
* Person Requesting Credit Click here to enter text.
* Position Click here to enter text.
* Number Registered Click here to enter text. Number Attended Click here to enter text.
* I am requesting Click here to enter text. credit(s) at $20.00**\*** per participant for a total of $Click here to enter text.
* Signature Click here to enter text. Date Click here to enter text.

(Administrator)

**\*** Credits will be in the amount of $20.00 per registered participant as the remainder of the fee goes towards the cost associated for the clinic. The t-shirt is yours to keep.