



816 Grandview Ave. ~ Pittsburgh, Pa 15211 ~ www.elitecheerleading.com

Coach's Name: \_\_\_\_\_

Coach's Home Address: \_\_\_\_\_

Coach's Home Phone: (\_\_\_\_) \_\_\_\_\_ Coach's Work Phone: (\_\_\_\_) \_\_\_\_\_

Coach's Cell Phone: \_\_\_\_\_

Coach's E-mail Address: \_\_\_\_\_

Name of School: \_\_\_\_\_

School Address: \_\_\_\_\_

School Phone: School Fax: (\_\_\_\_) \_\_\_\_\_

Billing Address (if different than home address): \_\_\_\_\_

Approximate Number of Students Who Will Attend Camp: \_\_\_\_\_

2 Full Days \_\_\_\_\_ 3 Full Days \_\_\_\_\_ 3 Super Sessions \_\_\_x\_\_\_  
(AM or PM) (Four hours each day)

Choreography Camp (3 Full Days) \_\_\_\_\_

*Four and five day camps upon request.*

**WEEKS PREFERRED:** (Example – Week of June 15, 2023)  
**Please be as flexible as possible.**

**First Choice Date:** \_\_\_\_\_

**Second Choice Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY**  
Dates  
Given: \_\_\_\_\_

Initial and  
Date: \_\_\_\_\_