

**\*\* THIS FORM MUST BE RETURNED BY February 6<sup>th</sup>, 2017 \*\***

**PLEASE PRINT ALL INFORMATION**

DATE: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

CHEERLEADER COACH: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX#: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

RETURN TO: SHRINE MAPLE SUGAR BOWL, INC.

P.O. BOX 820

LEBANON, NH 03766

PHONE #: (603) 448-1042

E-MAIL ADDRESS: [nhvtshrinebowl@gmail.com](mailto:nhvtshrinebowl@gmail.com)

WEBSITE: <http://www.shrinemaplesugarbowl.com>

FAX #: (603) 448-1092

Understanding that the 64<sup>rd</sup> Annual Shrine Maple Sugar Bowl Game will be played on August 5<sup>th</sup>, 2017 at Castleton University and that the net proceeds of the Game will help benefit the Shriner's Hospitals for Children. I present in nomination the names of the following girls from my school for the All Star Cheerleading squad which will perform during the game and will march in the pre-game parade.

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**Notes to Cheerleading Coach:**

1. Please provide a complete mailing address and telephone number for each nominee.
2. Nominees must be extremely skilled, eg: excellent jumps, motions and tumbling. Nominees must also be of exceptional character in their schools, on their teams, and in the community.
3. Every student nominated and selected will be contact and asked to complete a "consent" form.
4. Please list students' experience with your school's cheerleading (No. of years, training, etc.)
5. Girls must presently be in either 11<sup>th</sup> or 12<sup>th</sup> grade.
6. If you have any questions please contact Barbara Saine at the Shrine Maple Sugar Bowl office at 603-448-1042 or by e-mail at: [nhvtshrinebowl@gmail.com](mailto:nhvtshrinebowl@gmail.com)