I have read the entire Howell High School Varsity Pompon Team Winter 2025-2026 Handbook with my parent(s)/guardian and understand the commitment, expectations, and responsibility that is required for this team.

After reading please sign below and bring this page to tryouts

Student Printed Name:	
Student Signature:	
Date:	
Parent/Guardian Printed Name:	
Parent/Guardian Signature:	
Date:	