

All Star Cheer "NOVICE" Program Enrollment

2019/20 Season: October 2019 - March 2020

V-01-11

(Half-year teams, 1x/week practice, attend 3 "local" competitions, no out-of-state)

TUITION: \$79/month (Oct - Mar) + \$199 Down Payment

* Due by 11:59pm on the 1st of each month. \$10 late fee if paid after 1st of each month.

Sibling discount: 2^{nd+} child **saves \$50** off Down Payment

Pay-in-Full discount: pay by Jul-31 to save \$50

Tuition includes: Gym registration & insurance fee, USASF athlete membership, Team

practices & extra practices, Class tuition discount

MANDATORY TEAM ITEMS:

* Due by 11:59pm on their listed due date. \$25 late fee if paid after item due date.

Pay-in-Full discount: pay by Nov-15 to save \$25

Choreography & Music: \$159 (due Dec-15) Competitions & Coach: \$159 (due Jan-15)

Competition Uniform (if needed; same as '18/19 season): \$195 (due Nov-15)

Not included: Warm-up jacket, shoes, private lessons, awards banquet.

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FERMS & CONDITIONS (initial acknowledgment of e	each)
1) All payments are non-refundable. Payments are no illness, injury, sitting-out for late payment, joining after	ever pro-rated/refundedincluding cases of r October 2019 or quitting before March 2020.
2) Pay-in-full payments are discounted and therefore 1	00% <u>non</u> -refundable.
3) Merchandise (i.e. uniform, clothing, etc) will not be d	istributed if <u>ANY</u> payment (e.g. "tuition") is past due.
4) Service will be withheld (student sat-out) if paymen	ts become 30 days past due.
5) Team members are not guaranteed specific position	ons (e.g. "flyer"), or to perform at every competition.
6) Missed "Team" practice within 14 days of competi	tion may result in being replaced for that comp .
7) Missed "Team" practice during comp season month	ns: \$25 team hindrance fee (excused <u>&</u> unexcused).
8) Returned check: \$30 fee & no personal checks acce	epted for remainder of the season.
9) Early termination fee of \$250 is assessed if my child	quits the team before last competition of season.
I (parent / guardian) agree to be solely responsible to all above Terms & Conditions. I understand my withhold in CheerForce withholding service (i.e. student sat-out / refinancial Agreement disputes are adjudicated in Califo 16500 legal service fee if Small Claims Court adjudicates a	ding payment (<i>i.e. past due balance</i>) will result placed for competition). rnia Small Claims Court. CheerForce adds a
Print Parent / Guardian Name	Print Student Name
Parent / Guardian Signature	Date
If new this season, who referred you to CheerFord	ce?:



2019-20 All Star Cheer Registration

Simi Valley

		Last Name:
Date of Birth:	Age on August 31, 2019: _	Athlete Cell:
Current customers —	> Skip remainder of this pa	ge; complete reverse side of this for
New customers —> Co	omplete <u>both</u> sides.	
Parent Email (will become you	ır Username):	
Address:	City:	State: Zip:
Mother Name:	Fathe	r Name:
Mother Cell: ()	Fathe	r Cell: ()
follow their directions. In the r guardian listed above. EMERGENCY TREATMENT F medical treatment for my chil child to stabilize and/or impro	are case of a more serious injury, Ch RE-AUTHORIZATION: I authorize d. I also give CheerForce™ permissi we the current injury or condition th	neerForce policy is to first call 911, then call the particle. CheerForce™ and its representatives to consent on to administer the necessary emergency care that my child may have sustained during activities
follow their directions. In the riguardian listed above. EMERGENCY TREATMENT F medical treatment for my chil child to stabilize and/or improrelated to CheerForce™ instruor danger of serious or permanular minor injuries / medical	are case of a more serious injury, Chere case of a more serious injury, Chere case of a more serious injury, Chere case of a more serious injury of authorize the current injury or condition the ction, practices, or performances. Nent injury resulting from treatment	neerForce policy is to first call 911, then call the particle. CheerForce™ and its representatives to consent on to administer the necessary emergency care that my child may have sustained during activities. To prior determination to life threatening emerges need be made under this authorization.
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follow their directions. In the riguardian listed above. EMERGENCY TREATMENT F medical treatment for my chil child to stabilize and/or improrelated to CheerForce™ instruor danger of serious or perman MINOR INJURIES / MEDICAT medications. SAFETY PROCEDURES / LIA guidelines, and enforcement, fully aware that any activity in trampoline, etc) creates the puharmless for any injury or resuparties.	RE-AUTHORIZATION: I authorize d. I also give CheerForce™ permissive the current injury or condition the ction, practices, or performances. Nent injury resulting from treatment (ION: CheerForce will provide band BILITY RELEASE: CheerForce strive and therefore assumes no responsibility of serious injury, and I furtle ling expenses. I release and dischalled.	CheerForce™ and its representatives to consent on to administer the necessary emergency care that my child may have sustained during activities to prior determination to life threatening emerged need be made under this authorization. ages for minor scrapes & cuts. We do not provide the maximum in safety procedures, coility for any accidents or injuries that may occur. vity, and/or gymnastic equipment (ie Tumbl-Traner agree to hold CheerForce and its staff and off
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