

Texas Xtreme Cheerleading



**All-Star Cheerleading
2021-2022**

"Where the Elite compete"

Athlete Name: _____

Texas Xtreme Cheer

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Sex: M/F _____ Age: _____

School Attending: _____ Grade: _____

Parent/Guardian Information

Mother's Name _____ Phone Number: _____

Email Address: _____

Father's Name: _____ Phone Number: _____

Email Address: _____

Emergency Contact

Name: _____ Relationship: _____

Phone Number: _____

Only the individuals listed above are authorized to pick up my child or be contacted in case of emergency unless otherwise advised by a guardian.

Program Rules and Regulations

You are expected to attend ALL practices, exhibitions, and competitions as a team. Our routines are developed around every team member; therefore, one member's absence has a negative impact on all other team members and the routine. Be prepared to rearrange your schedules as needed; such as extra or extended practices. We will try to maintain a routine schedule for you to be able to make advance plans. Also, there will be closed practices as determined by the coaches.

Missing practices will result in a fine of \$35.00 if not approved by coach Alex. _____

Excused Absences are as follows - Need to complete an absence request form _____

- Death in the Family

- School related or cheerleading function

- Pre-Approved Absence

- Sick - missing school that day and unable to sit and watch practice

Unexcused Absences - Result in a \$35.00 fine _____

- Sick but went to school - athlete can watch practice and not participate

- Optional Activities

- Birthday parties - even the athlete's birthday party

- Transportation Issues

- Homework or a test - please plan ahead of time

Proper Attire will be required at all practices, exhibitions, or competitions _____

- Scheduled practice wear for each practice must be worn including cheer shoes

- Hair must be pulled back and out of the face

- No jewelry of any kind

- Nails must be unpainted for all competitions and no false nails

- Competition Makeup and hair must be worn as instructed

- Must be nice and neat

Parent Signature: _____ Date: _____

Parent Code of Conduct

Parents play an important team role in their child's commitment to our program. Please read this carefully and understand this commitment that you are making. Make sure to initial each statement

_____ If my child is involved in any manner of disrespect towards any members or coaches of Texas Xtreme, I will resolve the problem with my child immediately. This includes 'drama', please leave at the door.

_____ I will not make Texas Xtreme Cheer apparel without permission from the owner, Alex Reyna. This includes shirts, bows, jackets etc.

_____ I fully understand that the coaches reserve the right to suspend my child's participation indefinitely in practice or competition as a disciplinary action if any of the athlete code of conduct is not adhered to. A suspension can cause my child to lose his/her place in a specific section of the routine.

_____ I understand that time is essential to both the program and parents. I will do all that is necessary to get my child to practice on time and assure that they will not have to leave practice early.

_____ I am aware that this is a ONE-YEAR commitment and will do everything in my ability to enable my child to participate in all practices and competitions throughout the season.

_____ I will try to attend all parent meetings to retrieve information in which Texas Xtreme has prepared for upcoming schedules and events.

_____ I have read over the cheerleader's code of conduct with my child and understand what is expected of my child and will help to ensure my child's obligation to these matters.

_____ I understand that Texas Xtreme does not guarantee to win every competition.

_____ Absolutely zero tolerance of racism. If there is even a hint of that behavior, there will be an automatic dismissal from the cheer program. NO EXCEPTIONS!

Parent Signature: _____ Date: _____

Cheerleader Code of Conduct

Please make sure your athlete initials each statement.

_____ If I am involved in any matter of disrespect towards any members or coaches of Texas Xtreme, it will be dealt with swiftly and with consequences. This includes 'drama' which needs to be left at the gym door.

_____ I will come to practice with a POSITIVE attitude and I will give my 100% effort towards the agenda set by the coaching staff for that day.

_____ I will NOT use inappropriate language or participate in inappropriate behavior. I understand that my actions 24 hours a day are a reflection of my team and my Texas Xtreme.

_____ I will NOT disrespect any team member, coach, or competitor for any reason or at anytime. I WILL always show good sportsmanship no matter win or lose.

_____ I understand this is a ONE-YEAR commitment and that my team is depending on me to fulfill my responsibilities as a TEAM member.

_____ I will learn and obey all the rules and regulations of the gym and the cheer program.

_____ I understand that by breaking any of the codes of Conduct, I may be suspended or dismissed from my team and Texas Xtreme.

The obligations above reiterate the importance of the cheerleader and parents' responsibilities together. TEAM sports are based on individual commitments however, TEAM EFFORTS fuel them.

Athlete Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Payment Policy

Please read and understand that tuition is due on the 1st of each month and will be late as of the 8th. All Star fees will be due on the 15th of the designated months. Late fee will be added to All-Star payments after the 23rd. Each family will receive an email to pay your monthly invoices. If you are wanting to pay with cash or checks please come by the office before the 8th of the month. On the 8th of the month all unpaid invoices will be resent with a \$25.00 late fee added. A credit card is required to be placed on file for all students. No tuition will be prorated for missed classes. NO REFUNDS FOR ANY REASON!

_____ If payment is not made by the 8th of the month there will be a \$25.00 late fee added for each month the tuition is late. NO EXCEPTIONS!

_____ All fees must be paid on time, if an athlete falls one month behind on their payments, they will be suspended from the team until the balance has been paid.

_____ If an athlete falls two months behind on payments they will be removed from the team and their down payment will not be refunded.

_____ Remember that this season is a ONE-YEAR commitment

_____ All athletes are required to pay all fees

Competition fees are estimated. Families will be able to review the schedule before it is finalized to check for any major conflicts.

This is a ONE-YEAR commitment and athletes are expected to complete the entire season. If for any reason you do not fulfill your commitment and do not complete the season, there will be a \$350.00 fee charged to your credit card on file.

Parent Signautre: _____

Estimated Financial Obligations

There will be a \$500.00 down payment for all competitive athletes that will be your first payment. No refunds on your down payment. We will be putting the competition schedule together as soon as the dates become available. Please be advised that competitions are mandatory. We know this will take the full support of parents as well as cheerleaders to make this team a positive and successful one. **No Refunds for any reason.**

Tuition: Covers your two all-star cheerleading practices and one tumbling class per week. If extra practices are called, there will be no additional charge.

Monthly Tuition - \$150.00 will be invoiced every every month on the 1st

Down payment: Goes directly towards your all-star fees balance

Down Payment- \$500.00 due May 15th

All Star fees: Paid monthly and will include payments for practice wear, uniform, jacket, backpack, bow, make-up, Music and Choreography, Coaches and Competition Fees. This payment will begin the month following your down payment.

OPTION #1:

NEW ATHLETE: All-Star Fees - Six payments of \$300.00 invoiced on the 15th of June, July, August, September, October, and November

RETURNING ATHLETE: All-Star Fees - Six payments of \$250.00 invoiced on the 15th of June, July, August, September, October, and November

OPTION #2:

NEW ATHLETE: All-Star Fees - Nine payments of \$225.00 invoiced on the 15th of June, July, August, September, October, November, December, January, and February

Parents will be responsible for registering their athletes with USASF. You will have to upload a birth certificate and pay the \$30.00 fee. We will let you know when this needs to be completed by.

Team Shirts will be an additional cost and will be available to families as well for purchase.

Parent Signature: _____ Date: _____

Credit Card Information

Visa or Mastercard only

Card Number: _____

Exp. date: _____ CVC Number _____

Card holders name _____

Cardholders Address:

City: _____ State: _____ Zip Code: _____

I, the undersigned, authorize Texas Xtreme (Texas Xtreme Sports Inc.) to charge the credit card listed above, in the case of delinquent or missing all star payments or monthly tuition plus any late fees. No refunds for any reason.

I have read and fully understand the terms and conditions of the Payment Policy

Parent Signature: _____ Date: _____



Dear Parents,

Please be advised that while at the gym your child may be photographed/videotaped during various gym activities. With your consent, the photograph or video may be reproduced and released for use in the media, for example newspapers, brochures, flyers, videos, our gym website and various social media platforms such as Facebook, Instagram, and Snapchat.

Please indicate your preference below:

Athlete Name

☐

My child's photograph/video **MAY** be reproduced and released for use in the media.

☐

My child's photograph/video **MAY NOT** be reproduced and released for use in the media and therefore will not be included in pictures/videos.

Parent Signature

Date



Request for Absence

Requests that are pre-planned must be submitted at least two weeks prior to the absence dates. Requests will be reviewed and you will be notified of approval through email.

Name of Athlete: _____

Team Name: _____

Parent Name: _____ Phone Number: _____

Parent Email Address: _____

Date of Absense: _____

Reason for Absence:

_____ Death in the family

_____ Funeral to attend

_____ Approved School Related

_____ Approved Cheer related

_____ Doctor's excuse

_____ Sick from school

_____ Other: (please explain) _____

Parent Signature _____ Date: _____