

High School Credit Card Authorization

Parent/Guardian: _____

Cheerleader Name: _____

I/We authorize Arizona Element Elite Cheer a RMRM LLC company, the right to charge my account on a monthly basis for the cost of my athlete to attend the _____ High School Cheer Program at Arizona Element Elite Cheer. We understand that tuition is based off program cost, not weeks per month and that there are no adjustments should there be more or less than four practice weeks in a month. You understand that should your athlete miss a week or there is a school break for which your athletes coach does not schedule a make-up, the monthly tuition will not be pro-rated or adjusted.

Training program held at Arizona Element Elite. The charge is a monthly charge made on the 1st of each month and is for the month in advance. This is a monthly membership fee and is not refundable. If you athlete elects to stop the membership, it is up to you and/or the athlete to advise our office of this decision so that we can discontinue the membership. Notification of your athlete leaving the program after the fact will not generate a refund as, there are no refunds on fees paid.

I/We understand and accept that all tuition and fees paid are not refundable. We also understand that should a payment be declined or, you fail to make your monthly payment by the 5th of the month, you will incur a \$15.00 late fee. Failure to pay tuition or the fee as outlined by this agreement and, the tuition as quoted by the coach will result in your athlete being denied access to the gym and practice sessions.

Credit Card:

Visa MasterCard American Express Discover

_____ Account Number _____ Exp. Date _____ Code

Name on Account _____

Signature of Cardholder _____

Street Address: _____ City/State/Zip: _____

Parent/Guardian Signature: _____

Parent/Guardian Name (Print): _____ Date: _____

Cheerleaders Name: _____

ALL INFORMATION IS REQUIRED IN ORDER TO PARTICIPATE IN THIS EVENT. FAILURE TO PROVIDE REQUIRED INFORMATION WILL RESULT IN BEING DENIED ACCESS TO THE FACILITY.

Cheerleaders' Personal Information

First Name	Last Name
Street Address	City/State/ZIP
Date of Birth	Gender
Cheerleaders Cell #	Home Phone #
Mothers Primary Phone #	Mothers E-Mail Address
Fathers E-Mail Address	Fathers Primary Phone #

Are there any issues regarding restrictions as to pick up or visitation by either parent? YES NO

If Yes: _____

Parent/Guardian Signature: _____

Parent/Guardian Name (Print): _____

Date: _____

Cheerleaders Name: _____

I understand that tuition is due no later than the 1st practice of the month. If tuition is not paid by the 1st practice for the team for the month, I will not be allowed into the practice area.

_____ Student Signature

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INFORMED CONSENT AND ACKNOWLEDGEMENT AGREEMENT

I/We _____, parent(s)/guardian(s) of _____, who is attending High School Cheer training classes at Arizona Element Elite Cheer, give our consent for such participation by our son/daughter.

We understand that our son/daughter is required to be in good physical shape and condition to participate at a 100% physical level and that the activities, which he/she will be asked and expected to participate in, are strenuous and require physical and athletic agility and endurance. I/We fully understand that these activities include, but are not limited to a variety of gymnastic routines, that there will be a variety of mounts, dismounts and stunts requiring the coordination of more than one participant on the squad and furthermore, these activities include weather conditions including heat, sun and rain.

I/We fully understand that cheerleading is a sport in which the risk of injury is high; that any one of the routines involving our son/daughter's participation in cheerleading activities in general could lead to serious injury, including partial or total paralysis, even death. We have also discussed this with our child and among ourselves. Despite this understanding of the possibility of serious or catastrophic injury or death and the risks involved, we still consent to the participation of this sport by our son/daughter.

We represent to you that, to the best of our knowledge and belief, our son/daughter has no physical, medical or mental disability or other limitation that would restrict his/her ability to fully participate in this activity on a daily basis as described and explained to us.

We agree to, and by the signing of this agreement, release the coaches, assistant coaches, volunteers and staff of Arizona Element Elite Cheer a RMRM LLC company, from any claim of negligence by ourselves, our son/daughter, our heirs, executors and assigns, from any liability arising from claims for damages for injury to our son/daughter and any claims for loss of or damage to his/her property which may arise out of his/her participation in the Arizona Element Elite Cheer program.

In witness whereof, I/we have affixed our signature to this agreement this ____ day of ____, ____ Arizona Element Elite Cheer, Peoria, AZ 85382

Parent/guardian signature

Date

Parent/guardian signature

Date

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