



UNITED ELITE ALL STAR CHEER

REGISTRATION PACKET

2022-2023

Welcome to United Elite All Star Cheer!

Please read and complete all forms carefully and make certain you agree to comply with all policies and procedures. All forms in this Registration Packet must be completed, signed and returned to the United Elite Cheer Gym front desk along with required fees, copy of birth certificate (new athletes only) and two 4X6 photos (one headshot and one full body photo) of the athlete. A professional photograph is not required.

Thank you for choosing United Elite and welcome to our family!



REGISTRATION FORM AND MEDICAL RELEASE

ATHLETE'S LAST NAME: _____ FIRST NAME: _____

GENDER: MALE _____ FEMALE _____ DATE OF BIRTH: _____

CURRENT AGE: _____

CURRENT SCHOOL: _____ GRADE ENTERING 2022-23: _____

ATHLETE'S CELL PHONE: _____ ATHLETE'S EMAIL: _____

MOTHER'S FIRST NAME: _____ LAST NAME: _____

MOTHER'S CELL: _____ HOME PHONE: _____

FATHER'S FIRST NAME: _____ LAST NAME: _____

FATHER'S CELL: _____ HOME PHONE: _____

PRIMARY EMAIL: _____

SECONDARY EMAIL: _____

BILLING ADDRESS: _____
STREET CITY, STATE, ZIP

EMERGENCY CONTACT (IN THE EVENT PARENTS CANNOT BE REACHED):

NAME: _____ PHONE NUMBER: _____

RELATIONSHIP TO ATHLETE: _____

HEALTH INFORMATION:

ANY KNOWN ALLERGIES: _____

MEDICAL CONDITIONS: _____

ARE IMMUNIZATIONS CURRENT: _____

PREFERRED HOSPITAL: _____

MEDICAL INSURANCE COMPANY: _____

PARENT SIGNATURE: _____ DATE: _____

PARENTS/GUARDIANS ARE RESPONSIBLE FOR KEEPING THIS INFORMATION UP TO DATE. IF CHANGES OCCUR, PLEASE UPDATE THIS INFORMATION AT THE UE CHEER GYM FRONT DESK.



RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT (“AGREEMENT”)

In consideration of participating in the activities that United Elite Gymnastics and Cheer, LLC (“United”) conducts on and off United’s premises, including, but not limited to, gymnastics, cheerleading, tumble, and any other activity that in any way involves or is related to United (“Activity”), I represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe Activity conditions are unsafe, I will immediately discontinue participation in the Activity. I fully understand that the Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the Activity, the conditions in which the Activity takes place, or the negligence of the “RELEASEES” named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost and damages I incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue United, its respective administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the ‘RELEASEES’ HEREIN) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES” OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, WAIVER OF LIABILITY, AND ASSUMPTION OF RISK I, OR ANYONE ON MY BEHALF, MAKES A CLAIM AGAINST ANY OF THE RELEASEES, I will indemnify, save, and hold harmless each of the RELEASEES from any loss, liability, damage, or cost, which any may incur as the result of such claim.

TUITION, PAYMENTS AND REGISTRATION

Monthly fees MUST be paid via auto draft on the 2nd of each month. Auto draft is for tuition and registration only. Tuition is due on the 2nd day of the month and is **NON-REFUNDABLE**. If the card on file is declined, you have until the 10th of the month to pay before you are assessed a late fee of \$15.00. Tuition is based on 12 calendar months. Some months have 4 weeks, and some have 5 weeks; therefore, we do not prorate tuition for holidays or vacations. All other charges such as practice clothes, uniform or any other purchased items can be paid at the front desk. A \$35.00 fee will be charged for all returned checks.

Once your child is enrolled and you have paid a \$40.00 non-refundable registration fee or \$30.00 non-refundable second child fee, including applicable taxes, your child’s enrollment and United Elite Gymnastics & Cheer membership will continue for one year unless you un-enroll your child.

We reserve the right to cancel enrollment of any student, if that student or her/his parents violate safety rules, act in a disrespectful manner, or become uncontrollable. No refunds or credits will be issued.

The UE All Star Program is a one year commitment. If you decide to leave in the middle of our All Star Season for any reason you will be assessed a \$350.00 exit fee. This fee is to cover expenses to replace your athlete. If this fee is not paid you will not be able to enroll in any UE classes. **NO REFUNDS OR CREDITS WILL BE ISSUED.**

PHOTO USAGE

I hereby permit United to use images of my child in internal and external promotion material. This includes any printed material, broadcast and print advertising, promotional videos, social media, and the United Elite website which are produced or published by United Elite.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law, and agree that if any portion of this Agreement is held to be invalid, the balance notwithstanding, shall continue in full force and effect.



**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND
INDEMNITY AGREEMENT ("AGREEMENT") CONTINUED**

PARENTAL CONSENT

I, the minor's parent and/or legal guardian, understand the nature of the Activity and the Minor's experience and capabilities and believe the minor to be qualified to participant in the Activity. I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasee from all liability, claims, demands, losses or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasee or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasee, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasee from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Printed name of Participant

Date

Printed name of Parent/Guardian

Signature of Parent/Guardian

Date



All Star Cheerleading is a “SELECT” team sport. It takes a full commitment from both cheerleader and parents. All practices are mandatory. Athletes are allowed a summer vacation during the months of June, July and August. Please keep in mind, while we all need breaks from the demanding schedule, the summer is also a great time for growth for athletes and teams. We recommend that athletes do not miss more than two consecutive weeks during the summer months. Athlete summer vacation dates must be emailed to carol@uegym.com and copied to the athlete’s team coach.

Practices can be intense prior to competition and extra practices will be scheduled as needed. Extra practices are mandatory. All athletes realize that by missing practice their team cannot work all baskets, stunts, pyramids, tumbling or transitions efficiently. Athletes that have poor attendance, extended illnesses, injuries, or excessive absences will be replaced. There will be no refunds.

The following excused and unexcused policy is not negotiable. If a cheerleader has five unexcused absences within the one-year commitment, he/she is subject to dismissal from his/her team. There will be no refunds.

UNEXCUSED ABSENCES: School electives such as, but not limited to, athletics, gymnastics, sports, band, theatre, choir, etc. Working, fatigue, personal issues, transportation, birthdays, schoolwork, homework, studying, social occasions, weddings, church occasions, family occasions, family time, etc.

EXCUSED ABSENCES: Mandatory Middle School and High School Cheer events. Mandatory school functions that result in a grade. This does not include chosen school electives or athletics. Death in the family, contagious illness which has been diagnosed by a physician and a physician’s note is provided. Documentation/proof will be required for all excused absences.

The Attendance Policy goes into effect once the fall schedule begins in September 2022 and will end after the last competition and/or event of the season. We will abide by the following policy for the 2022-2023 All Star season.

3 tardies (more than 15 minutes late) = 1 unexcused absence.

3 unexcused absences = \$50 fee will be assessed.

4 unexcused absences = \$25 fee per absence will be assessed. **(After 3 unexcused absences you will be charged a \$25 fee for each and every additional unexcused absence.)**

5 unexcused absences will result in coaches’ discussion regarding removal from the team.

Attendance will be taken daily at team practices and at any other required events. It is the parent’s responsibility to notify coaches of any upcoming absences, if an athlete is sick, or going to be tardy. **Coaches and Director (carol@uegym.com) should be notified as soon as possible, prior to the absence or tardy, via email and the athlete’s coach should be contacted by phone call or text.** Attendance is required at every practice, class and event unless excused by your coach for illness and/or injury. You must contact your coach and they will decide whether your athlete should attend practices, classes, events and competitions. You must provide a doctor’s note. Injury or illness one week before competition may omit the athlete from competition as deemed necessary by the coaching staff. No fees will be refunded if your athlete is sick or injured. This also applies to Show Teams and Special Needs teams. The team and individual can only be successful with everyone at practice. It is the responsibility of the athlete to learn any changes they missed due to an absence, which may include extra practice time.

Please understand this is a team sport with no subs, alternates, fill-ins, etc. One person out can affect the entire team. Thank you in advance for your understanding and cooperation.

Printed name of Participant

Date

Printed name of Parent/Guardian

Signature of Parent/Guardian

Date



ATHLETE CODE OF CONDUCT

United Elite's athletes are held to a high standard of moral character. Our goal is to surround ourselves with positive athletes who strive to reach both the team's goals and their own personal goals. Parents, please read through the following obligations with your athlete explaining each one. Both a parent and the athlete need to initial each requirement.

- I will not use inappropriate language or participate in inappropriate, immoral behavior. I will not participate in the illegal consumption of tobacco, alcohol, or drugs. I understand that all of my actions both inside and outside of the gym are a reflection of United Elite and should demonstrate strong character.

_____ Athlete Initials _____ Parent Initials

- I understand this is a full, one year commitment and that a team is depending on me to fulfill my responsibilities as a team member. I will be committed to my coaches, my teammates and myself striving to reach both the team's goals and my personal goals.

_____ Athlete Initials _____ Parent Initials

- I will come to practice with a positive attitude, and I will work hard to achieve the goals set by my coaches. I realize that a positive attitude is contagious, and I will do my best to influence my teammates in a positive manner.

_____ Athlete Initials _____ Parent Initials

- I will not disrespect any team member, coach, parent or competitor from United Elite or any other gym for any reason at any time.

_____ Athlete Initials _____ Parent Initials

- I will demonstrate good sportsmanship striving to be a humble winner and a gracious loser.

_____ Athlete Initials _____ Parent Initials

- I will learn and obey the rules and regulations of United Elite.

_____ Athlete Initials _____ Parent Initials

- I will wear the scheduled practice wear to each practice. I understand it is my responsibility to help my parents keep up with the schedule and the outfits.

_____ Athlete Initials _____ Parent Initials

- I will arrive at all competitions on time with my uniform, hair and makeup completed to United Elite standards.

_____ Athlete Initials _____ Parent Initials

- I understand that all material, music and routines are the property of United Elite and are not to be used for any other purpose including school squads and talent shows.

_____ Athlete Initials _____ Parent Initials

- I understand that breaking any of the codes of conduct above may result in suspension or dismissal from United Elite.

_____ Athlete Initials _____ Parent Initials

Printed name of Participant

Date

Signature of Parent/Guardian

Date



PARENT CODE OF CONDUCT

Parents are vital in helping their children maintain high moral character, fulfill their commitment, and keep a positive attitude. United Elite wants to serve as a partner to the parents helping each child achieve these goals, but the primary job must lie with the parents. Please read this carefully and understand that you are making a ONE-YEAR commitment of time and financial resources. You are also committing to support our program's philosophies and goals. Please initial each obligation.

- I understand that my actions in the viewing room and at competitions are a reflection of United Elite and should be of strong moral character. I will be a positive role model for my child and will encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all athletes, coaches, and spectators at every practice and competition.

_____ Parent Initials

- 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, camps, retreats, and competitions throughout this season. I understand that a team is depending on my child to fulfill his/her responsibilities as a team member. I will do all that is necessary to get my child to practice on time and assure that he/she does not need to leave practice early.

_____ Parent Initials

- I will teach my child that doing one's best is more important than winning, so that my child will not feel defeated by the outcome of a competition or his/her performance. I will encourage my child to be a humble winner and a gracious loser.

_____ Parent Initials

- I will respect the coaches and their authority during practices and competitions and will not question, discuss, or confront the coaches during a practice or a competition, nor will I pull my child out of practice without communicating with the coach.

_____ Parent Initials

- If my child is involved in any matter of disrespect towards any United Elite staff member or student, I will resolve this problem with my child immediately.

_____ Parent Initials

- I understand that my child must wear the proper practice wear that is scheduled for any specific day and will support this requirement with my child. If my child loses any part of their practice wear, I understand that I must purchase a replacement immediately.

_____ Parent Initials

- I fully understand that the coaches reserve the right to suspend my child's participation indefinitely in practice or competition (which may include losing positions) as a disciplinary action if any of the rules, policies or codes of conduct is not adhered to.

_____ Parent Initials

- I will attend parent meetings, read emails, and check the website to retrieve information that United Elite has prepared.

_____ Parent Initials

- I understand that the viewing area will be closed at some point during the season. I will respect the coach's wishes and not stay and watch practices.

_____ Parent Initials

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

Signature of Parent/Guardian

Date



PAYMENT OPTIONS

UE offers two different payment plan options. Please review both options carefully. There are no refunds.

Option One

One-Time Tuition Payment.

Payment will be due no later than one month after registration.

Tuition total for the season is paid upfront in one lump sum.

This includes monthly tuition only. It does not include other fees such as choreography, music, uniform, practice clothes, bid events, etc., or the possibility of extra competition fees if cost exceeds the anticipated amount.

You will receive a 5% discount on tuition only.

Siblings will receive a 10% discount on monthly tuition.

Exit fee applies if athlete withdraws from the Program before the season is complete.

There are no refunds.

Option Two

Monthly Tuition Payments.

Tuition will be paid monthly by automatic draft. Automatic draft required.

You must sign up for automatic draft payment with a debit/credit card.

Automatic draft payments will begin June 2022 and end May 2023.

Siblings will receive a 10% discount on monthly tuition.

Exit fee applies if athlete withdraws from the Program before the season is complete.

There are no refunds.

Siblings will receive a 10% discount on monthly tuition.

Exit fee applies if athlete withdraws from the Program before the season is complete.

There are no refunds.

Payment Option Choice:

Option One _____ Option Two _____

I have read the options and requirements and understand no refunds will be provided with either payment option.

Printed name of Participant

Date

Printed name of Parent/Guardian

Signature of Parent/Guardian

Date



AUTOMATIC DRAFT AUTHORIZATION FORM

Parent's Name: _____
Last First

Athlete's Name: _____
Last First

Parent's Email: _____

AUTOMATICALLY charge my credit card per month (initial please) _____

Visa _____ MasterCard _____ Discover _____

Card #: _____ Debit _____ Credit _____

Expiration Date: _____/_____ CVV Code: _____

Applicant acknowledges the financial agreement and policies of United Elite Gymnastics and Cheer. I hereby authorize United Elite Gymnastics and Cheer to charge my debit/credit card on the 2nd of each month for monthly instruction services, and for additional expenses on respective due dates outlined in the Tryout Information Packet. I also authorize annual membership fee of \$40.00/child and \$30.00/second child plus applicable taxes one time per year. I do understand that it is my responsibility to keep my card current. **If my account is not paid by the 5th of the month, my child/children will be required to sit out of their team practice and any classes until United Elite is notified and account is brought current. Athletes will not be allowed to participate in private lessons until account is current.**

Cardholder's Name: _____

Cardholder's Billing Address: _____

City: _____ State: _____ Zip: _____

Signature: _____ Date: _____

[
Date Entered: _____ Entered By: _____