



TEXAS ALLSTAR CHEER

(ALLSTAR CHEER & DANCE OF TEXAS, INC.)



SUMMER CAMP PROGRAMS

Financial Policies & Procedures AutoPay/Authorization Form

The SCProgram: Texas Allstar Cheer (“TAC”) is delighted to offer its summer camp training program (“SCProgram”). The SCProgram is a high-energy program that is designed to develop and enhance your child’s cheerleading and tumbling skills through, among other things, various instruction in cheer and tumbling skills, conditioning, strength building and other training activities. TAC will, in addition to tumbling/cheer training, provide strength and stamina-building activities.

PLEASE NOTE – THE SCPROGRAM IS NOT LICENSED BY THE STATE OF TEXAS.

TAC Facility: The SCProgram will be held at the TAC facilities.
Location: 325 Ed Schmidt Blvd, Hutto, TX 78634

Calendar and Summer Break: The SCProgram runs in accordance with the summer schedule of the regional school calendars. The program runs in 1-week sessions. TAC will be closed June 30th through July 6th in observance of the July 4th holiday.

Admission into the SCProgram: You must do the following things in order to be admitted into the SCProgram – a) complete the following forms listed below and submit them to the TAC office prior to your child’s first day of participation in the SCProgram; b) create an account in GoMotion (if you do not already have a GoMotion account with TAC -if you need assistance with this matter, please contact the TAC office); c) pay the Fees set forth below.

Forms:

1. TAC Registration Form;
2. The following TAC Summer Camp Training Program Forms:
 - A) Parental Permission/Release of All Claims/Consent to Medical Treatment,
 - B) Travel Card
 - C) Financial Policies & Procedures/AutoPay/Authorization Form.
 - D) Register for each camp at <https://www.texasallstarcheer.com/page/system/classreg-shopping>

Fees:

3. Payment of Registration Fee (described below);
4. The cost of each Fun camp is ***\$199 per week. A non-refundable and non-transferable tuition deposit (Tuition Deposit) of \$50.00 for each SCProgram session enrolled.*** To complete the enrollment, each child must be registered through GoMotion(<https://www.texasallstarcheer.com/page/system/classreg-shopping>) for each camp. This will hold your child’s place in that particular SCProgram session and once the SCProgram session begins, the Tuition Deposit will be applied to your child’s tuition. If your child does not attend the SCProgram session or if notice of cancellation is not timely given, the Tuition Deposit is forfeited.

Registration Fee/Tuition Deposit: The following SCProgram fees will be due at registration:

Registration Fee: for one child \$45.00; for two or more children in a family \$65.00 total for the year. The Registration fee is a fixed, annual fee based on the Calendar Year (regardless of when you enter the SCProgram) and it is not refundable or pro-ratable. **The registration fee is due at the time you register your child.**

Tuition Deposit: See # 4 under Fees.

Cancellation Notice: Notice must be received at least 7 days before the SCProgram session is set to begin. Tuition deposit is non-refundable/non-transferable.

Time of Arrival: Drop off time is 8:00 am Monday – Friday. Pick-up times will be between 5:00 pm – 5:30 pm. Early pick-up can be arranged but should be in writing to the TAC office a week in advance. We plan to attend some activities away from the TAC Facility and want to ensure enough time to get your child back to the TAC facility with time to spare. Early drop-off and late pick-up may be arranged for an additional fee (contact the office for details).

Safety Rules for TAC's Transportation: While in TAC's transportation vehicle, your child must at all times 1) remain seated; 2) wear his/her safety belt; and, 3) follow all TAC staff directions. Following TAC's safety rules are imperative and any violation will result in your child being dropped from the transportation feature of the SCProgram. You will be promptly notified by TAC if your child violates any of these safety rules.

SCProgram Breaks, Snacks and Lunch:

Break: Each day your child will be afforded a 45-minute break. During that time, your child will be given the opportunity to have snack time, games, or open gym.

Snacks: TAC will offer your child a snack during late morning and early afternoon. Your child may elect to purchase a drink or additional snacks from the vending machine. Please provide your child with money to do so.

Lunch: Each student needs to bring a sack lunch every day to the TAC Facility. An hour lunch break will be given each day for all students to eat. Please make sure days we have activities away from the TAC Facility that you bring food that does not need to be refrigerated.

Appropriate SCProgram Clothes: Your child should bring gym clothes, tennis shoes, and socks to wear while attending the SCProgram. If your child does not bring appropriate clothing and footwear (i.e., street clothes, skirts, dresses, blue jeans) your child may not be allowed to participate in certain activities. This is a safety precaution. Your child will be given a summer camp shirt to wear when the SCProgram children are attending activities away from the TAC Facility. Each student should bring specific field trip clothing attire that is suitable for that trip, i.e. socks for trips to trampoline parks.

Parent Pickup Time/Late Pickup Fee: Pick-up time for your child in the SCProgram is no later 5:30 p.m. (unless your child is attending an additional TAC class on that particular day or is enrolled in late pick up). Any child picked-up after 5:30 p.m. (unless your child is attending an additional TAC class that day or is enrolled in late pick up) will be assessed a late pick-up fee of One Dollar (\$1.00) for each minute late.

Illness/Mediation: If your child is ill or has any of the following symptoms, he/she will not be allowed to attend the SCProgram or any field trips with the SCProgram until he/she is well and no longer exhibits such symptoms: fever; vomiting; diarrhea, excessive coughing, etc. If your child exhibits signs of illness, we will call you or a named authorized person to inform you of such illness and to arrange to pick up your child if necessary. TAC cannot dispense medication.

Injury/Emergency: If your child is injured during the SCProgram, TAC will contact you immediately. If you cannot be reached, TAC will call the person listed as the Emergency Contact on your child's TAC Registration Form. If TAC cannot reach the Emergency Contact person either, your child will be transported to the nearest hospital.

Additional Fees: – You will be responsible for paying any and all Additional Fees. Additional fees may include but are not limited to, late pick-up fees, NSF fees, late payment fees, field trips associated with each camp (if your child elects to attend).

Field Trips: – Themed Camps are designated for various field trips. TAC will not provide alternate care for campers that do not wish to attend field trips. Fees for the week of the field trip are approximately \$60.00. Each field trip cost will be charged at the end of the week of the field trip. There are typically 4 field trips per session. Your child may also elect to bring extra money for buying souvenirs, gifts or consumable items.

SCProgram Discipline: Discipline of your child may sometimes be necessary. TAC's discipline consists of positive reinforcement, redirection, and time out/sit out. Such discipline will be age-appropriate. If there is a behavior issue, TAC will contact you. If the behavior issue is not resolved, TAC reserves the right to drop your child from the SCProgram.

Credit Card Authorization: It is required by TAC that a current credit card authorization be on file in TAC's office for your child. If you elect to pay tuition for the SCProgram sessions your child attends, Registration Fee and/or the Additional Fees by check or cash, your credit card authorization will not be used. However, if you have elected to pay by check or cash and the required payments are not made timely, your credit card authorization will be used.

Miscellaneous:

1. Any late payments will incur an additional handling charge of \$25.00.
2. Any payment attempts resulting in a NSF (nonsufficient funds), declined credit card, expired credit card, returned check, etc. will incur an additional \$30.00 fee. Please furnish us with all your updated information regarding your credit card.
3. Your child's account must be current and in good standing to attend and participate in the SCProgram. TAC reserves the right to deny access to the TAC facility for failure to keep up with financial obligations.

Contract: By signing this agreement, you are agreeing to comply with the terms and to be responsible for your child's SCProgram Tuition and any Additional Fees.

Child's name: _____ T-Shirt Size: _____

Clinic or Camps (check all that apply):

Session Dates:

- Jump Into Summer - May 27 - May 31**
- Animal Fever - June 7 - June 7**
- Aqua Adventure I - June 10- June 14**
- Cheer Camp - June 17 - June 21**
- Party In the U-S-A - June 24 - June 28**
- Exploration - July 8 - June 12**
- Aqua Adventure II - July 15 - July 19**
- Cheer Camp - July 22 - July 26**
- Summer Olympics - July 29 - Aug 2**
- Aqua Adventure III - August 5 - Aug 9**

Name (Printed): _____ Date: _____

Signature: _____



**CREDIT/DEBIT CARD
CHARGE AUTHORIZATION FORM**

I authorize *TEXAS ALLSTAR CHEER* to charge my credit/debit card on or about the 1st day of each summer camp.

Child's Name: _____

Name as it appears on the Card: _____

Card: Visa Mastercard Discover

Card Number: _____ **Exp. Date:** _____

Security(3# on the back) _____

Card Billing Address with Zip code: _____

Signature: _____ **Date:** ___ / ___ /20 ___

Print Name: _____



TEXAS ALLSTAR CHEER
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SUMMER CAMP TRAINING PROGRAM

Parental Permission / Release of All Claims / Consent to Medical Treatment

Child's Name: _____ Date of Birth: _____
 Add. children: _____ Dates of Birth: _____
 Name of Parent/Guardian: _____ Phone #: _____ Cell #: _____
 Child's Address _____ City _____, State _____ Zip _____
 Parent's Address _____ City _____, State _____ Zip _____

Please read and sign the following:

I/we the parent(s)/guardian(s) of the above mentioned Child (whether one or more) do hereby grant permission for the Child to participate in any and all cheerleading, tumbling, dance and/or other activities (whether one or more, "activities") while enrolled as a student in any session of **TEXAS ALLSTAR CHEER's Summer Camp Training Program**, whether at or away from the training facilities of **TEXAS ALLSTAR CHEER** (addresses set forth below - one or more referred to as "training facility"). I/we represent that the Child is physically able to participate in the activities without limitations. I/we acknowledge and agree it is my/our responsibility to promptly inform **TEXAS ALLSTAR CHEER** in writing of any health updates regarding the Child throughout the year.

I/we give **TEXAS ALLSTAR CHEER** the right and permission to film, photograph, or videotape my/our Child or me/us for any reproductions associated or in any way connected with **TEXAS ALLSTAR CHEER** (including any form of advertisement or promotional purposes).

The Child will be trained, instructed and conditioned in regard to cheerleading skills as well as activities that are designed to improve your Child's stamina, flexibility, and agility. Furthermore, there will be theme activities for each session and such activities may be conducted offsite, such as field trips to zoos, water parks, skating rinks, etc. **TEXAS ALLSTAR CHEER** will provide transportation of your Child to and from such offsite activities. During such transportation, training, instruction, conditioning, and participation in offsite activities, there is the reality of possible injury. I/we understand that there is personal risk involved in my Child (i) being transported to and from the offsite activities or elsewhere, and, (ii) participating in any session of the **TEXAS ALLSTAR CHEER** summer camp training program (whether at the TAC Facilities or offsite). I/we further understand that such transportation and physical or other activities can result in SEVERE INJURIES, DISABILITY OR EVEN DEATH. I/we, the parent(s)/guardian(s) are assuming full responsibility for the Child's personal safety, and I/we do hereby release and hold harmless **TEXAS ALLSTAR CHEER**, its employees, supervisors, instructors (whether paid or volunteer), agents, invitees, employees, officers, directors, and shareholders from any and all claims, demands, actions, expenses (including attorney's fees, threatened or incurred), judgments, executions and liabilities that may occur from any injury, accident and/or incident (known or unknown), including death to the Child, that may arise as a result of the Child's being transported by **TEXAS ALLSTAR CHEER** as well as my Child's participation in **TEXAS ALLSTAR CHEER's** summer camp training program, including all activities, whether at TAC's Facilities or otherwise, and regardless of any negligence on the part of **TEXAS ALLSTAR CHEER**.

I/we further authorize a representative of **TEXAS ALLSTAR CHEER** to consent to medical treatment of the Child in the event of an emergency while at or away from the training facility. I/we give permission for **TEXAS ALLSTAR CHEER** to give my/our Child first aid and to provide or arrange for transportation to a hospital and receive emergency medical treatment. I/we will assume all costs for such medical care. Please note TAC IS NOT A DAYCARE FACILITY AND IS NOT LICENSED BY THE STATE OF TEXAS.

Parent(s)/Guardian(s) Signature: _____ Date _____



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TRAVEL CARD

Emergency Contact and Medical Information for a Child

Child's Name	Date of Birth	M F Sex
Parent's/Guardian's Name	Parent's/Guardian's Name	
Cell Phone	Email Address	Cell Phone Email Address
Address	Address	
City, ST ZIP Code	City, ST ZIP Code	

Additional Approved Adults to Release for Student for Pickup

Contact Name/Relationship	Primary Emergency Contact
Cell Phone	Phone Relationship
Contact Name/Relationship	Contact Name/Relationship
Cell Phone	Cell Phone
If for some reason, someone else who is not listed above to with TAC staff in order to provide the person's name	Pick up my child, I understand that I must contact the office & speak Who shall pick up my child. I understand: (initial)

Medical Information

Hospital/Clinic Preference	
Physician's Name	Phone Number
Insurance Company	Policy Number
Drug Allergies/Food Allergies/Medical Conditions	
Medications	