



Evaluation and Team Registration Information

Tryout Dates:

May 18th Parent meeting/Jumps & Dance Choreography

5:30-9:00pm

All athletes trying out.

Parents will have a brief 30 minute meeting.

May 20th Tumbling Evaluations

Mini Division Ages 5-8: 1pm-2pm

Youth/Junior Division Ages 9-14: 2pm-3pm

Senior Division Ages 15-18: 3pm-4pm

May 19th Stunting Evaluations

Mini Division Ages 5-8: 8am -10am

Youth/Junior Division Ages 9-14: 11am-1pm

Senior Division Ages 15-18: 2pm-4pm

May 21st Jump/Dance Evaluations

Mini/Youth Division Ages 5-11: 6-7pm

Junior/Senior Division Ages 12-18: 7-8pm

Tryout Clinics:

March 24, 2018 & April 28, 2018; 10am – 1pm

Try out clinics will jumpstart athletes who wish to try out for the 2018-2019 season! Athletes will learn what the coaches will look for at try outs, giving them the opportunity to assess the areas he/she is struggling in and can improve on prior to try outs! The clinics are optional and are available for youth, junior, and senior divisions. Athletes should only attend one clinic.

Tryout Fees:

\$40 for new athletes; \$30 for returning athletes; \$50.00 for any athlete (new or returning) who does not turn in all required paperwork and items at tryouts

What to bring to tryouts:

- Registration Form and Credit Authorization
- Liability/Waiver Form
- Financial Agreement
- Policy Agreement
- Handbook Acknowledgement

Please attach the following with forms

- Copy of birth certificate (required for proof of age)
- Recent photo

**photos and birth certificates will be retained for our records and not returned*

STEALTH Team Registration Form - Please print legibly

Student Name		Date of Birth & Gender
Address	City	Zip Code
Parent's e-mail		Home No.
Parent/Guardian Name	Cell No:	Work No.
Parent Guardian Name	Cell No:	Work No:
Emergency Contact		Phone

**FINANCIAL AGREEMENT FORM/CREDIT CARD AUTHORIZATION
* REQUIRED FOR ALL MEMBERS***

CARD INFO IS REQUIRED	
Name as it appears on card _____	
Billing Address of Card Holder: _____ City: _____ State: _____ Zip: _____	
Circle One Visa Mastercard	Credit Card No. _____
Expiration Date: _____	CID# (required) _____
I agree to notify STEALTH of any changes to my billing info before my next billing cycle.	

Failure to use the STEALTH agreement will not relieve the member of the member's obligation to pay all installments required hereunder. This agreement is personal and may not be assigned or transferred. Member may cancel this contract within 3 business days after signing of the contract. In the event of any default by the member, STEALTH shall be entitled to recover its reasonable costs, and attorney's fees, associated with securing, enforcing and collecting under this contract.

_____ Today's Date _____

Signature of Account Owner- Agrees to pay all fees in accordance to the terms of this agreement. I agree to have my card on file charged for monies owed, including tuition or team fees, in the event that my account becomes past due. I also agree to have the separation fee charged if my athlete quits or is removed from the program.

PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of Stealth All Stars LLC, its owners, agents, officers, employees, and all other persons or entities acting in any capacity on their behalf , I hereby agree to release, discharge, and hold harmless Stealth All Stars LLC, on behalf of myself, my minor children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I understand and acknowledge that the activities that I or [CHILD'S NAME] _____(hereinafter referred to as the "Minor") engage in while on the premises or under the auspices of Stealth All Stars LLC pose known and unknown risks which could result in injury, paralysis, death, emotional distress, or damage to the Minor, to me, to property, or to third parties. The following describes some, but not all, of those risks:

Cheerleading and gymnastics, including performances of stunts and use of trampolines, entail certain risks that simply cannot be eliminated without jeopardizing the essential qualities of the activity. Without a certain degree of risk, cheerleading students would not improve their skills and the enjoyment of the sport would be diminished. Cheerleading and gymnastics expose participants to the usual risk of cuts and bruises, and other more serious risks as well. Participants often fall, sprain or break wrists and ankles, and can suffer more serious injuries. When traveling to and from shows, competitions and exhibitions raise the possibilities of any manner of transportation accidents. In any event, if you and/or the Minor are injured, medical assistance may be required which you must pay for yourself.

2. I expressly agree and promise to accept and assume all of the risks, known and unknown, connected with Stealth All Stars LLC-related activities, regardless of the age of the Minor and/or whether or not the Minor is presumed to be able to assume those risks, including but not limited to performance of stunts and use of trampolines. My participation and that of the Minor is purely voluntary. No one has forced or coerced the Minor or me to participate. I elect for the Minor and/or myself to participate in such activities in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to hold harmless and indemnify Stealth All Stars LLC from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with the Minor's and/ or my participation in Stealth All Stars LLC-related activities.

4. Should Stealth All Stars LLC be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and reimburse it for such fees and costs.

5. In the event that I and/or the Minor file a lawsuit against Stealth All Stars LLC, such suit shall be brought in the State of Maryland, and the substantive and procedural laws in that jurisdiction shall apply in any such action without regard to the conflict of laws rules thereof. I agree that if any portion of this agreement is found void or unenforceable, the remaining portions shall remain in full force and effect. This agreement shall be deemed to have been jointly drafted by the parties for all purposes involving its construction and enforcement.

6. By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation or the participation of the Minor in this activity, I and/or the Minor may be found by court of law to have waived the right to maintain a lawsuit against Stealth All Stars LLC on the basis of any claim from which I have released Stealth All Stars LLC either personally and/or as the parent, natural guardian and/or legal guardian of the Minor by signing this Agreement.

7. I hereby give Stealth All Stars LLC and its affiliates the unrestricted right and permission to copyright and re-use, publish, and republish photographic portraits and pictures of the Minor and/or myself or pictures in which the Minor and/or myself may be included, in whole or in part, separately or in conjunction with other photographs, in any medium now or hereafter known, and for any purpose whatsoever, including but not limited to illustration, art, promotion, or advertising.

8. In an emergency, I grant permission Stealth All Stars LLC and its personnel, to have authority, at my expense, in the event I cannot be reached, to utilize the most convenient volunteer rescue squad vehicle or ambulance to transport the Minor and/or myself to the hospital and if necessary, I authorize medical treatment. I verify that the Minor and/or myself have passed a medical examination within the last twelve months and are capable of participating in cheerleading, gymnastics, dance and related activities.

9. All monies paid to Stealth All Stars LLC in any capacity are NON-REFUNDABLE, NON-TRANSFERRABLE, and UNASSIGNABLE regardless of reason. I agree that any attempt by Stealth All Stars LLC to collect monies not paid by myself resulting in a collection agency, attorney, or court involvement, I will be responsible for the payment of all collection fees, court costs and attorneys' fees incurred by Stealth All Stars LLC and/or myself. I understand that late fees and/or penalties may be applied to all past due payments and/or returned checks.

10. I acknowledge that Stealth All Stars LLC has the right to either suspend or dismiss any participant/customer for any offense, by participant or family member, which we deem detrimental to the entire Stealth All Stars LLC organization.

I have had sufficient opportunity to read this entire document. I have been given the opportunity to consult an attorney for any reason regarding this document or in the event I did not understand any provision of this document. By signing below, I have read the document and understand it and I agree to be bound by its terms.

Parent/Guardian Signature: _____ Print Name: _____ Date: _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION

In consideration of _____(print minor's name) ("Minor") being permitted by Stealth All Stars LLC to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold Stealth All Stars LLC from any and all claims which are brought by, or on behalf of Minor and which are in any way connected with such use or participation by Minor.

Parent/Guardian Signature: _____ Print Name: _____ Date: _____

FINANCIAL AGREEMENT

THIS FORM IS DUE AT THE TIME OF REGISTRATION

Name of parent/legal guardian

Parent of _____
Print name of team member

I UNDERSTAND AND AGREE TO THE FOLLOWING:

- Tuition and assessments are billed on the 20th of the month and due on 1st of the month for the current month. Example: January tuition is billed on December 20 and due by January 1.
- My uniform is a separate cost and is due on its set due date(s). I understand shoes are not included with my uniform, I will order them personally. Stealth will provide a link to the designated shoe choice for the season.
- I am subject to a late fee of \$15.00 after the 1st of the designated month. Excessive tardiness in payments will be grounds for my child not competing, possible dismissal and being sent to a collection agency.
- As a parent signing this contract; I am solely responsible for the tuition, travel expenses, uniform and assessments as outlined in this packet.
- If I leave the program prior to the end of the season, I am subject to a \$200 separation fee.
- I understand that all payments, for tuition, equipment, merchandise, classes, are non-refundable.

Parent Signature _____ Date _____

Parent Name Printed _____

POLICY AGREEMENT

1. The cheer season is a full year, July 2018 – May 2019. _____
2. All Stealth customers are required to have a credit card on file. **Athletes will not be permitted to participate until there is a card on file.**_____
3. All tuition is billed on the 20th of each month for the following month. Tuition is due on the 1st and is late after this date. On the 2nd of the month the card that is on file will be charged any fees due and a late fee of \$15._____
4. Your account must be current for your child to participate in team practices, classes, competitions, events. _____
5. I understand that if my child quits, or is removed from the team, (for any reason other than family relocation of 50+ miles away) a \$200 separation fee will be charged to my card. _____
6. It is mandatory to abide by the Attendance policy as outlined in the handbook. All athletes are to attend their teams regularly scheduled practices. If an athlete is not feeling well, or injured, they are still expected to be at practice. If your child has a fever or is vomiting they should not attend. A parent must call the office or team coach PRIOR to practice for this to be excused. All school activities and pre planned vacations should be submitted 3 weeks in advance, in writing, as explained in the packet. After the athlete has reached 3 unexcused absences for the season a meeting will be held with the Director. _____
7. If at any time your child misses a competition, for an unexcused reason, it will result in immediate termination from the program and no refunds will be given and the separation fee will be charged. _____
8. We will issue a list of “Black Out Dates”. During these dates any missed practices will result in the athlete not being permitted to compete at the next event. No competition fee refunds will be given. _____
9. An athlete can, and will, be suspended from practices or competitions for displaying inappropriate behavior and refusal to follow gym rules and coaches instructions. You are still responsible for your athlete’s fees during the period of suspension. _____
10. All members must be picked up in a timely manner from practice. You should arrive 10 minutes before the end of practice to pick up your child. If a coach has to wait more than 5 minutes with your child a fee of \$1 per minute will be charged to your account. _____
11. Fundraising- All fundraisers facilitated are individual, unless otherwise noted. We will hold three gym fundraisers throughout the season, parents are expected to participate in these fundraisers. We will apply credits to your accounts. Questions regarding fundraisers can be e-mailed. _____
12. All transportation to and from competitions is the sole responsibility of parents. I understand some competitions require a specific hotel. Information will be given as those dates approach. _____

13. I understand that as a Stealth member I am not allowed to use the Stealth Logo and make my own merchandise. I cannot sell or create my own Stealth clothing or merchandise. I also understand I am not allowed to contact any vendors on behalf of Stealth, doing so is grounds for dismissal from the program. _____
14. I understand that my athlete needs to come to practice every day in the designated practice attire. _____
15. We reserve the right to close practices at any time. Please remember to be your athlete's, teams and coach's biggest cheerleader! As a parent, if you are causing drama you can and will be removed from the gym. _____
16. It is the parent's responsibility to stay informed. Check your email and Band regularly, if you are not receiving emails contact the front desk immediately so we can check your account. _____
17. Part of an All Star Team is uniform, hair and makeup. To be on the team, all athletes must follow these guidelines. If you cannot commit to doing hair and makeup in the designated style, your athlete can't participate. _____
18. Athletes are placed on a team with the expectation that the skills they have at tryouts will remain and grow through the season. If an athlete can no longer fulfill the role they were placed on the team for, they will be moved to a team where they can fulfill the necessary role. _____

Handbook Acknowledgment

I have read and fully understand the rules, policies, guidelines, and information in this handbook. I understand failure to abide by these policies may result in removal from the programs at STEALTH All Stars. I have read and fully understand my financial commitment to STEALTH All Stars as outlined in this packet and understand that upon return of this form, any and all funds paid to STEALTH All Stars are nonrefundable. I understand that my commitment is for the entire competitive season and that my commitment or failure to commit affects all of the athletes at STEALTH All Stars. I understand that I am entering into this program of my own free will. I also understand that by signing below I agree for my child to be photographed and used for media, social media or advertising and promotional purposes. In addition, I agree to give STEALTH full permission to seek medical attention and/or take any actions deemed necessary including but not limited to drug testing to ensure the safety and well-being of my child and those around them.

I fully understand this document is a contract between myself and Stealth All Stars LLC.

Parent Signature _____ Date _____

Parent Name Printed _____

Athlete Signature _____ Date _____

Athlete Name Printed _____

Monthly Payment Method

Please indicate which method you will use to make your monthly payment:

_____ Cash or Check (Monthly)

_____ Electronic check via the parent portal (monthly)

_____ Credit or Debit Card, *in person/parent portal* (Monthly) **(3% charge will be added to each transaction)**

_____ Credit or Debit Monthly Automatic Withdraw on the 1st of each month. **(3% charge will be added to each transaction)**