

## Welcome to the 2019-2020 Stingray Allstar Season!

[www.stingrayallstars.com](http://www.stingrayallstars.com)

We are so delighted that you have chosen to be *ONE OF A KIND!*

Each and every family is important to us and our program.

#RAYSthestandard #RTS

Assessment fee is \$50.00 if you turn in your completed packet or register online by Wednesday April 24th. Any packet submitted online or turned in on Thursday April 25<sup>th</sup> or after will be charged a \$75.00 Assessment fee. Private or Early Assessments are \$200.00 and must be scheduled through the front office.

### Assessments: Worlds Teams

Monday May 13<sup>th</sup> and Tuesday May 14<sup>th</sup>

6:00 p.m.- 9:30 p.m. You must attend both days for the entire time.

These are our highest-level teams, Level 5. Fulls, double fulls, specialty tumble passes, and elite stunting skills are standard for these teams.

You must be at least 13 years of age by 8/31/2019.

Anyone that wants to be considered for a Worlds team must attend these two days.

*Even if you have been on a Worlds team at Stingrays or another gym, you will still attend both Assessment days.*

Flyers will be evaluated throughout the process.

You will receive an email regarding your team placement. If you are not placed on a Worlds team, you will receive a phone call from the front office.

### World Team Announcements Wednesday May 15<sup>th</sup>

### Clinics: Tiny, Mini, Summit Teams

Tuesday May 14<sup>th</sup> at our North gym (3126 Cobb Parkway N., Kennesaw, 30152)

Wednesday May 15<sup>th</sup> at Main gym (1431 Cobb Parkway N., Marietta, 30062)

There will be a parent meeting at the beginning of each clinic. Make arrangements to attend this meeting. You may attend both clinics, but you must attend at least one. You do not have to sign up for these, but you will have to turn in your completed packet or register online.

6:00 p.m. -7:30 p.m. 11 years & younger

7:30 p.m. -9:00 p.m. 12 years & older

(as of 8/31/19)

### Assessments: Tiny, Mini, Summit Teams

Thursday May 16<sup>th</sup>-12 years & older 5:00 p.m., 6:15 p.m. or 7:30 p.m.

Friday May 17<sup>th</sup>-11 years & younger 5:00 p.m., 6:00 p.m. or 7:00 p.m.

Saturday May 18<sup>th</sup>-12 years & older 9:00 a.m., 10:30 a.m., 1:30 p.m. or 3:00 p.m.

**Team Announcements Tuesday May 21<sup>st</sup>** You will receive an email from the office with team name and practice days and times.

**Practice begins on Wednesday May 22<sup>nd</sup>**

### **“FAST PASS”**

If you were on a Stingray team for the 2018-2019 season and do not want to go through the assessment process, you can choose to **Fast Pass**. This means you are accepting the same age group and level you were on last season. You must stay with-in your gym, i.e. you cannot Fast Pass in Marietta if you were on a Johns Creek or Cartersville team. Follow these steps; download Fast Pass Form, print and complete top section. Bring completed form and packet to the front office to register and pay. The Allstar director will review each form and you will be notified only if you are NOT approved to Fast Pass.

**\*\*Deadline to have Fast Pass forms into the Marietta office is April 24<sup>th</sup>. No exceptions.\*\***

### **TUITION:**

May 2019 through January 2020 monthly tuition payments are \$315.00.  
February 2020 through April 2020 monthly tuition payments are \$210.00.

### **MONTHLY TUITION INCLUDES:**

All team practices and a reserved spot in a one-hour weekly tumble class (plus 2 drop in classes weekly, when space is available)  
Choreography Fee  
Music Fee  
Competition Fees

### **MONTHLY TUITION DOES NOT INCLUDE:**

\$200.00 Coach's Fee. This fee is per family, not per cheerleader.  
Uniform, warm-ups-**must be the new style warm-up**, shoes, bows, backpack and various team apparel  
Worlds Fee and Summit Fee  
Travel/Hotel Expenses  
Stunt Camp  
Crossover Fees  
USASF Registration Fee

### **APPROXIMATE COSTS:** (based off previous years, these prices are subject to change)

Full Uniform \$385.00 (some teams uniform prices will vary), Warm-ups \$175.00, Shoes \$90.00-200.00, Bows \$20.00-\$30.00, Backpacks \$85.00-\$105.00, Practice Wear/Shirts/Jerseys/Sweatshirts \$30.00-\$50.00, Worlds Fee \$150.00-\$395.00, Summit Fee \$125.00-\$465.00.

Travel costs will vary greatly.

Again, all of these are estimates and are subject to change.

\*Be sure to have your cheerleader's photo taken when you turn in your paperwork to the front office.

\*If you have never registered with USASF you **must** provide a photocopy of your child's birth certificate.

***All accounts must be paid in full to register for Assessments for the upcoming season and you must keep your account current to remain active on your team. There will be no refunds made to anyone who is asked to leave the program or that quits a team.***

**PARTICIPANT INFORMATION**

Stingray Sport Center  
4680 Morton Road  
Johns Creek, Ga. 30022  
770-552-0700

Stingray Cheer Company  
1431 Cobb Pkwy N  
Marietta, Ga. 30062  
678-581-9218

Stingray Brands  
199 Hickory Lane  
Cartersville, Ga. 30120  
770-607-0750

**Mother/Guardian**

First: \_\_\_\_\_ Last: \_\_\_\_\_

**Father/Guardian**

First: \_\_\_\_\_ Last: \_\_\_\_\_

**Phone Number**

Mother/Guardian Cell: \_\_\_\_\_ Father/Guardian Cell: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Billing Address**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Email Address**

Mother/Guardian: \_\_\_\_\_ Father/Guardian: \_\_\_\_\_

**Participant Information**

First: \_\_\_\_\_ Last: \_\_\_\_\_

Birthday: \_\_\_\_\_

**Medical and Insurance Information**

Medical Insurance Provider: \_\_\_\_\_ Policy No./Group No.: \_\_\_\_\_

Provider Address/City/State/Zip: \_\_\_\_\_

Provider Number: \_\_\_\_\_

Is the Participant currently being treated for any type of medical condition? YES or NO (circle one)

If "YES", please explain: \_\_\_\_\_

Is the Participant allergic to any known medications or suffer from any allergies? YES or NO (circle one)

If "YES", please explain: \_\_\_\_\_

Is the Participant currently taking ANY medications? YES or NO (circle one)

If "YES", please explain: \_\_\_\_\_

Are there any other known medical issues or conditions that we should be made aware of? YES or NO (circle one)

If "YES", please explain: \_\_\_\_\_

Please carefully read this entire form. This form must be completed in full, signed, and returned before your child may participate in any Activities (as defines below).

PARTICIPANT AGREEMENT

As parent or legal guardian of \_\_\_\_\_, a minor ("Minor"), and in consideration for Minor's participation in the cheerleading, dance and other activities and services, including, without limitation, travel to and from such activities, competitions, conferences, meetings, and other events that may require travel (collectively, the "Activities"), conducted and provided by STINGRAY CHEER COMPANY, INC., a Georgia corporation; STINGRAY SPORT CENTER, LLC, a Georgia limited liability company; STINGRAY BRANDS, LLC, a Georgia limited liability company, and their respective affiliated entities, owners, agents, officers, employees, representatives, and all other persons or entities acting in any capacity on their behalf (collectively, "SA"), I AGREE AS FOLLOWS:

I. Liability Release. ON BEHALF OF MYSELF AND MY HEIRS, ASSIGNS, EXECUTORS, AND ADMINISTRATORS, I RELEASE AND FOREVER DISCHARGE SA FROM ALL CLAIMS, JUDGEMENTS, LOSSES, LIABILITIES, DAMAGES, COSTS, AND EXPENSES (COLLECTIVELY, THE "CLAIMS") OF ANY NATURE ARISING OUT OF OR IN ANYWAY RELATED TO THE MINOR'S PARTICIPATION IN THE ACTIVITIES WHETHER OCCURRING ON THE PREMISES OF ANY SA LOCATION OR ANY OTHER LOCATION; I FURTHER AGREE TO DEFEND, INDEMNIFY, AND HOLD HARMLESS SA FROM AND AGAINST ANY AND ALL SUCH CLAIMS, INCLUDING, WITHOUT LIMITATION, ATTORNEYS' AND OTHER PROFESSIONALS' FEES AND COSTS. I understand that this release and discharge of Claims includes, without limitation, any Claims based on the negligence, action, or inaction of SA and covers personal and bodily injury (including death) and property damage, whether suffered by Minor before, during, or after participation in any Activities, and includes all Claims arising from the publication of use of any photograph, videotape, or narrative in any media. I acknowledge that SA makes no representations or warranties, either express or implied, regarding the condition or suitability of SA's or any other locations or equipment for the Activities. The laws of the State of Georgia shall govern this release and indemnity agreement.

II. Medical Release. I acknowledge and agree that Minor's participation in the Activities subjects Minor to the possibility of physical illness or serious injury (including death). I further acknowledge and agree that Minor is assuming the risk of such physical illness or serious injury (including death) by participating in the Activities. In the event of such physical illness or injury, I authorize SA to obtain necessary medical treatment for Minor and I release, hold harmless, and forever discharge SA from any Claims arising from or related to any physical illness or serious injury (including death) and to the exercise of this authority. I further acknowledge and agree that I will be responsible for any and all medical and related costs and expenses incurred by and on behalf of Minor for any such physical illness or injury.

III. Appearance Agreement. I understand that SA may from time to time produce promotional and other audio or visual materials and media relating to the Activities (the "Promotional Material"). I understand that, as a participant in or spectator of such Activities, Minor may be included in video recordings, audio recordings, photographs, and images taken during Activities for use in Promotional Material. THEREFORE, I HEREBY ASSIGN, TRANSFER, AND GRANT TO SA, WITHOUT RESERVATION OR LIMITATION, THE ROYALTY-FREE, EXCLUSIVE RIGHT TO USE SUCH VIDEO RECORDINGS, AUDIO RECORDINGS, PHOTOGRAPHS, AND IMAGES OF MINOR, AS WELL AS MINOR'S NAME, LIKENESS, PERSONAL AND DEMOGRAPHIC INFORMATION, VOICE AND APPEARANCE AS PART OF ANY PROMOTIONAL MATERIAL. IN GRANTING THIS LICENSE, I HEREBY WAIVE ANY RIGHT TO INSPECT OR APPROVE ANY SUCH PROMOTIONAL MATERIAL PRIOR TO PUBLICATION. I FURTHER AGREE THAT, UPON THE REQUEST OF SA, I SHALL IMMEDIATELY REMOVE OR TAKE DOWN ANY PROMOTIONAL MATERIALS THAT MINOR OR I HAVE UPLOADED OR POSTED TO ANY WEBSITE OR SOCIAL MEDIA PLATFORM (INCLUDING, BUT NOT LIMITED TO, FACEBOOK, TWITTER, INSTAGRAM AND YOUTUBE), OR IN ANY OTHER PUBLIC FORUM.

IV. Confidentiality. I acknowledge and agree that SA develops and creates unique and valuable proprietary dance routines, cheerleading routines, training techniques, and other intellectual property that are unique and valuable to SA and that may be used to prepare for and participate in competitive events (collectively, the "Intellectual Property"); I further acknowledge and agree that maintaining the confidential and proprietary nature of the Intellectual Property is of the utmost importance to SA and its competitive success. I understand that I may video-record, audio-record, photograph, or take other images of the Intellectual Property solely for my, Minor's, or Minor's immediate family's personal, non-commercial use; PROVIDED ALWAYS, HOWEVER, THAT MINOR AND I SHALL NOT POST OR UPLOAD ANY SUCH RECORDINGS OR IMAGES TO ANY WEBSITE OR SOCIAL MEDIA PLATFORM (INCLUDING, BUT NOT LIMITED TO, FACEBOOK, TWITTER, INSTAGRAM, AND YOUTUBE), OR IN ANY PUBLIC FORUM WITHOUT THE PRIOR WRITTEN CONSENT OF SA.

V. Breach. I ACKNOWLEDGE AND AGREE THAT ANY BREACH OR THREATENED BREACH OF SECTION IV OF THIS AGREEMENT WILL CAUSE SA IRREPARABLE INJURY FOR WHICH NO ADEQUATE REMEDY AT LAW IS AVAILABLE, AND I CONSENT TO THE ISSUANCE OF AN INJUNCTION PROHIBITING ANY CONDUCT VIOLATING THE TERMS OF SECTION IV. I ACKNOWLEDGE THAT ANY VIOLATION OF THIS AGREEMENT BY MINOR OR BY ME MAY RESULT IN MINOR BEING SUSPENDED FROM OR PERMANENTLY EXPELLED FROM PARTICIPATION IN SOME OR ALL ACTIVITIES AND MY SUSPENSION FROM ATTENDING AND SPECTATING SOME OR ALL ACTIVITIES. I ACKNOWLEDGE THAT IN ANY CASE WHERE MINOR IS SUSPENDED OR PERMANENTLY EXPELLED FROM PARTICIPATION IN SOME OR ALL ACTIVITIES, I WILL NOT BE ENTITLED TO ANY REFUND OF ANY AMOUNTS PAID FOR PARTICIPATION IN ANY CURRENT OR FUTURE ACTIVITIES.

I have had sufficient time and opportunity to read this agreement. I have read this document in its entirety and understand it. Therefore, by affixing my signature below, I agree to be bound by the terms of this agreement.

PARENT/GUARDIAN:

MINOR:

SIGNATURE

SIGNATURE

NAME (PRINT)

NAME (PRINT)

DATE

DATE

**Financial Commitment/  
Credit Card Information**

**Financial Commitment  
(Billing Authorization)**

I have read the packet and fully understand my financial commitment to The Stingray Allstars outlined in this document. I understand that my commitment is for the 2019-2020 Allstar competitive season. I understand that I am giving my credit card/debit card information and that information will be used if I do not meet payment deadlines to Stingray Cheer Co. I understand that I will forfeit any monies paid if I choose to leave a team or am asked to leave the program. I understand that I am entering this program of my own free will.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVC code on back of card: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Card Holder Cell Phone Number: \_\_\_\_\_

Card Holder Email Address: \_\_\_\_\_

Athlete's Name: \_\_\_\_\_

**EVERYONE** is required to submit credit card/debit card information and to be on auto-pay.

*It is your responsibility to inform the office of any changes to this card.*

Monthly fees are billed to your Stingray account on the 1<sup>st</sup> of every month. Payment is expected on or before the 7<sup>th</sup>. This credit card will be charged for any outstanding balance on the 8<sup>th</sup>.

**\*\* Due to the timing of tryouts, May/June charges and auto payment dates will be adjusted. \*\***

### ASSESSMENT FORM

Name: \_\_\_\_\_

Age as of August 31, 2019: \_\_\_\_\_

DOB: \_\_\_\_\_

Current School: \_\_\_\_\_

Grade '19- '20: \_\_\_\_\_

**Cheer Experience:**

At which position(s) do you have experience? NONE FLYER BASE BACKSPOT

Most experienced Stunting Level:

- \_\_\_ Level 1 (no experience/prep level stunts or below)
- \_\_\_ Level 2 (extended two-leg stunts, straight ride baskets)
- \_\_\_ Level 3 (extended one-leg stunts, full downs)
- \_\_\_ Level 4 (full ups, switch ups, double down dismount)
- \_\_\_ Level 5 (extended level tick tocks, full ups, kick-double baskets)

Please list cheer experience by year and program:

\_\_\_\_\_

Do you cheer for your school?

- Competition YES NO
- Football YES NO
- Basketball YES NO

Extracurricular Activities: (Ex. Chorus, Band, Youth Group)

\_\_\_\_\_

**Worlds Assessments**

Have you ever been on a Worlds team? YES NO

If yes, where? \_\_\_\_\_

If not place on a Worlds team, do you give permission to use your Assessment to be placed on Summit team? YES NO

**USASF**

If you have ever registered through USASF, please list the last gym you were registered with:

\_\_\_\_\_

### THIS SIDE FOR STAFF USE ONLY.

Age Division	Stunt Position	Stunt Level	Level
Running			
Standing			
Jumps			
Motions			
Presence			
Other/Stunt/Flexibility			
Height:		Weight:	