

# All-Star Spirit, Inc.

## dba Miss Tammy's All-Star Co.

### 2009-2010

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parents Name \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail address (not required) \_\_\_\_\_

Previous training \_\_\_\_\_

Known allergies or physical conditions of which we should be aware:

\_\_\_\_\_

Responsible party guaranteeing payment \_\_\_\_\_

Responsible party SSN \_\_\_\_\_

Responsible party address \_\_\_\_\_

Responsible party phone \_\_\_\_\_

In consideration of enrollment of my child in classes at "All-Star Spirit, Inc./dba Miss Tammy's All-Star Co.", I do hereby waive, release and forever discharge any and all claims against "All-Star Spirit, Inc./dba Miss Tammy's All-Star Co.", school of cheerleading, gymnastics and dance, and/or any involved personnel, for damages or injury to my child in class, traveling to, and/or from, classes, program demonstrations, and/or competitions in cheerleading, gymnastics, and/or dance, or any activities in connection with "All-Star Spirit, Inc./dba Miss Tammy's All-Star Co.".

Tuition payments are due on or before the 10<sup>th</sup> of each month. All late payments will be subject to a \$10.00 late fee. Students do not forfeit their place in class because they miss a class: therefore, any student that is dropping a class/classes, **must** notify "All-Star Spirit, Inc./dba Miss Tammy's All-Star Co.", **in writing** before the 10<sup>th</sup> of the month, or they will still be responsible for the full months bill. By signing below, I am indicating that I have read and understand this agreement, and agree to pay my account. I also understand that any account over 90 days past due will be subject to collection, and could incur additional expenses at that time.

Signed \_\_\_\_\_ Date \_\_\_\_\_