

# ***PALM BEACH LIGHTNING ALLSTARS***

## Waiver of Liability/ Medical Release/ Participant Agreement

Date: \_\_\_\_\_ Age as of Aug. 31<sup>st</sup>, 2011: \_\_\_\_\_

Participants Name: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_ Sex \_\_\_\_\_

Parent/Guardians Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Mother's cell: \_\_\_\_\_ Father's cell: \_\_\_\_\_

Child cell: \_\_\_\_\_

Email Address:(parent) \_\_\_\_\_ (child) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone#: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

List any medications currently prescribed(if any): \_\_\_\_\_

List any injuries: \_\_\_\_\_ List any allergies: \_\_\_\_\_

Cheerleading,dancing and tumbling entails certain risks which simply cannot be eliminated without jeopardizing the essential qualities of the activity. Trained instructors will be present during all practices, however there is always a risk of injury that cannot be prevented.

I, the undersigned parent or legal guardian of \_\_\_\_\_ understand and acknowledge that the activity about to be engaged in poses known risk and unanticipated risk which could result in injury, illness, paralysis, emotional distress, damage to myself, or death. In the event of such illness or injury, I give consent and authorize *Palm Beach Lightning Allstars* to obtain any necessary medical attention, treatment, surgery or the administration of drugs by qualified and licensed medical personnel for the minor. In the event of such illness or injury, I hereby release or hold harmless *Palm Beach Lightning Allstars*, it's owners, directors, officers, employees, instructors and sponsors against any and all claims, demands, losses, liabilities, suits, costs, fees or other damages. I further agree that all expenses of such medical attention and treatments will be assumed by me or by my insurance company. I understand that I will be contacted by *Palm Beach Lightning Allstars*, as soon as possible to the best of their ability in the event of an emergency regarding said minor.

I understand that *Palm Beach Lightning Allstars* will produce promotional material relating to their events. I understand that as a participant the minor may be photographed or videotaped during this event. I hereby grant *Palm Beach Lightning Allstars*, its successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape the minor and to utilize the minor's face, likeness, voice and appearance as part of the event, and in advertising and promoting this event or promoting similar future events, without reservation or limitation. I understand in gaining these rights that *Palm Beach Lightning Allstars*. is under no obligation to exercise any of these forgoing rights, licenses and privileges herein granted.

I have received, completely read, and understand the above release and waiver provided by Palm Beach Lightning Allstars.

Signature of Parent or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

# ***PALM BEACH LIGHTNING***

**CHILD'S NAME:**


AGE: (as of Aug 31st, 2010)

DATE OF BIRTH:

GRADE:

KNOWN MEDICAL  
CONDITIONS:

KNOWN ALLERGIES:

CURRENT MEDICATIONS:

INSURANCE CARRIER:

POLICY #:

PHONE #:


FAMILY DOCTOR:

DR.PHONE #:


**MOTHER/GUARDIAN NAME:**

HOME PHONE #:

WORK PHONE #:

CELL PHONE #:

EMAIL:


**FATHER'S NAME:**

HOME PHONE #:

WORK PHONE #:

CELL PHONE #:

EMAIL:


**CHILD'S CELL #:**

EMAIL:


**ALTERNATE CONTACT NAME:**

HOME PHONE #:

WORK PHONE #:

CELL PHONE #:


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**SPECIAL NOTES**

# ***PALM BEACH LIGHTNING ALLSTARS***

## ***2011 – 2012***

### **TUITION AND FEES**

**Registration (annually): All athletes - \$50(non-refundable)**

-15% discount for siblings on lesser of two fees (tuition only)

-15% discount on tuition only if paid in full by May 31st

#### MONTHLY TUITION FEES:

TINY/MINI	FREE 1 <sup>ST</sup> YEAR
MINI (RETURNING)	\$90.00
YOUTH	\$135.00
JUNIOR	\$135.00
SENIOR	\$135.00
MALES	FREE

#### ADDITIONAL FEES:

Uniforms inc. briefs	\$300.00
Practice wear: *shirts (3)	\$60.00
Bows	\$25.00
Warm-ups	\$150.00
Monogrammed bags (3)	\$100.00
Make-up	\$75.00
Choreography	\$250.00
Competition fees (approx)	\$1100.00
Music	\$75.00
Annual Gym Assessment Fee	\$150/family/year

\*Each athlete will be required to purchase a new pair of white Reebok “Freestyle” hi-tops

\*There will be an annual “gym assessment fee” required by all athletes/family – this will help offset extra expenses incurred throughout the season (ex. parties, gym improvements, end of year banquet, yearbooks, etc.)

# ***PALM BEACH LIGHTNING ALLSTARS***

## ***2011 – 2012***

### **MANDATORY PAYMENT SCHEDULE**

<b>MAY</b>	<b>JUNE</b>	<b>JULY</b>	<b>AUG</b>	<b>SEPT</b>	<b>OCT</b>	<b>NOV</b>	<b>DEC</b>	<b>JAN- APR</b>
TUITION	TUITION	TUITION	TUITION	TUITION	TUITION	TUITION	TUITION	TUITION
	PRACTICE WEAR	MUSIC	UNIFORM	BOWS	MAKE-UP			
	CHOREO. (1 <sup>ST</sup> PYMNT)	CHOREO. (2 <sup>ND</sup> PYMNT)	MONOGRAMMED BAGS(OPTIONAL)	COMP. FEES (1/3 BAL.)	WARM-UP			
	GYM ASSESSMENT FEE		COMP.FEES (1/3BAL.)		COMP. FEES (1/3 BAL.)			

\* Monthly tuition is due by the 1st of every month to avoid a penalty of \$30.00.

\* Tuition is \$1620/season, regardless of registration date.

\*Competition fees ***must*** be paid in full by October 30th.

\*Accounts must be current to participate in any activities.

\*All fees must be paid according to payment schedule – if not paid by the end of each month, the credit card on file will be charged.

# COMPETITION INFORMATION 2012

COMPETITION	COMPANY	DATE	LOCATION	AMOUNT
STATE CHAMPIONSHIPS OF FL	AM. CHAMP.	JAN. 14-15	THE OCEAN CENTER 101 N. ATLANTIC AVE. DAYTONA BCH., FL 32118	\$135.00
FLORIDA MATCHPLAY	AM. CHAMP.	JAN. 29	SOUTH FL FAIRGROUNDS 9067 SOUTHERN BLVD. WEST PALM BCH., FL	\$120.00
NATIONALS	NCA	FEB. 25-26	DALLAS CONV. CENTER DALLAS, TX	\$195.00
THE AMERICAN OPEN	AM. CHAMP.	MAR. 17-18	ORANGE CNTY. CONV. CENTER 9800 INTERNATIONAL DR. ORLANDO, FL 32819	\$175.00
ULTIMATE NATIONALS	US SPIRIT	MAR. 24-25 OR MAR 31-1	UNIVERSAL STUDIOS 6000 UNIVERSAL BLVD. ORLANDO, FL 32819	\$269.00
ULTIMATE NATIONALS	COA	APR. 7-8	GAYLORD PALMS CONV. CENTER 6000 W. OSCEOLA PKWY KISSIMMEE, FL 34746	\$195.00
CHAMPIONSHIP	NCA	APR. 21	THE BAND SHELL/OCEAN CNTR. 101 N. ATLANTIC AVE. DAYTONA BEACH, FL 32118	\$116.00

**\*COMPETITION FEES WILL BE PAID IN 3 INSTALLMENTS AND ARE DUE BY OCTOBER 30TH.**

**\*SCHEDULE IS TENTATIVE AND SUBJECT TO CHANGE**

**\*IF A WORLD BID IS RECEIVED FOR ANY LEVEL 5 TEAM, THERE WILL BE AN ADDITIONAL COMP IN APRIL**

# ***PALM BEACH LIGHTNING ALLSATRS***

## ***2011 – 2012***

### **PRIVATE LESSONS**

#### ***CHEER TUMBLE: (PBL)***

	(1/2 hr.)	(1 hr.)
*1 ON 1	\$20.00	\$40.00
*2/CLASS	\$12.50/EA.	\$25.00/EA.
*3/CLASS	\$10.00/EA.	\$20.00/EA.

#### ***CHEER TUMBLE: (NONPBL)***

	(1/2 hr.)	(1hr.)
*1 ON 1	\$25.00	\$50.00
*2/CLASS	\$17.50/EA.	\$35.00/EA.
*3/CLASS	\$15.00/EA.	\$30.00/EA.

#### ***STUNTING:***

	(1/2 hr.)
*1 ON 1	\$20

Parents should schedule private lessons directly with the coach. Make sure you exchange phone numbers in case either party needs to cancel. Except in cases of *extreme* emergency, if a parent cancels **less than 1 hour in advance, they are still required to pay for the lesson.** If the coach cancels less than 1 hour in advance, they are required to provide an alternate lesson at no charge.

Private lessons are paid to the instructor. If you have a past due balance with PBL, however, you will not be allowed to take private lessons, whether billed or paid at the lesson.

Please note, coaches are not allowed to do private lessons in the gym without another coach, parent or team member/friend present. No one-on-one lessons allowed. For security and liability reasons, they must have someone else present to witness all lessons.

If a coach tells you to follow any procedure other than the one outlined here, please check with a gym owner first to make sure the change in procedure is appropriate.

# ***PALM BEACH LIGHTNING***

## ***2011 – 2012***

### **RULES AND REGULATIONS CONTRACT**

**I hereby understand that every time “PBL” is mentioned throughout this contract it is meant to be inclusive of Palm Beach Lightning Allstars, Inc., its officers, shareholders, agents, and employees.**

#### **\*GENERAL**

1. Only registered athletes are allowed in the practice area.
2. Siblings, family members, friends, etc. are not allowed in the practice area.
3. All spectators must sit in the designated seating area and keep the noise level down at all times.
4. Any person that disrupts a practice will be asked to leave the gym immediately.
5. No food, drinks, or gum are permitted in the practice areas.
6. All trash must be disposed in the appropriate trash receptacles.
7. Cell phones must be put on silent mode and left outside the practice area.
8. PBL is not responsible for any personal items lost or stolen.
9. The PBL website and your personal e-mails must be checked daily for any and all updates.
10. All completed forms or information needed by PBL will be downloaded and turned in to the PBL office as requested.

#### **\*TEAMS**

*PBL retains the right to:*

1. Place its athletes on the team(s) it feels will best suit them and the program.
2. Move, replace, add, suspend, or even dismiss an athlete for a period of time or indefinitely from a team or the entire program based on criteria including but not limited to:
  - A. Attendance
  - B. Conduct
  - C. Skills
  - D. Finances
3. Decide if an athlete may participate on more than one team.
4. Decide the roles and/or positions an athlete will have/play on their team(s). (Ex. base, flyer, back spot, tumbler, etc.)
5. Request that an athlete or team take additional classes to improve their skills at an additional cost.
6. Request that an athlete or team practice longer than their regularly scheduled time or add additional practices or competitions if deemed necessary.

*Athletes that elect to participate on more than one PBL team must:*

1. Be in good financial standing.
2. Be willing and able to fulfill all the responsibilities required by each team.
3. Be responsible for any additional fees they incur beyond their first team.

## **\*ATTENDANCE**

*All athletes must:*

1. Make PBL priority over any other extra-curricular activities. Other sports, work, or vacations are NOT an excuse to miss practices or competitions (January – April).
2. Attend and be prepared to participate in all PBL activities including those unexpectedly added throughout the season regardless of illness or injury unless otherwise recommended by a doctor through valid written documentation.
3. Arrive at least 15 minutes early to all PBL activities.
4. Schedule all vacations so as not to interfere with any PBL activities.
5. Notify PBL in writing and/or by phone immediately of all expected tardiness or absences. Continued absences will be grounds for disciplinary actions or dismissal.
6. Be productive @ practices in order to maintain your position on the team. Failure to do so will result in dismissal from the team.
7. If you are sick or injured, you must still attend practice. You will not be required to participate. You will watch any changes made that directly affect you (unless vomiting or fever above 100).
8. Absolutely NO misses during the months of January, February, March and April. This is our National season and we will be training extra during these months. Athletes missing during these months will not participate at their National competitions.
9. Summer attendance – NEW THIS SEASON – summer attendance is VERY important to the development of the teams. Please note that we expect team members to be at summer practices if they are in town. Low attendance will affect your final team placement!!

## **\*PRACTICES**

1. There will be at least but not limited to two (2) mandatory 2&1/2 hour practices per week.
2. There will be at least but not limited to one (1) additional mandatory practice, at the coach's discretion, and as needed, the week of all competitions with prior notice.
3. Private tumbling lessons are encouraged but not required.
4. Each athlete will be required to attend at least one tumble class per month.
5. There will be a mandatory stretch class for flyers thirty (30) minutes prior to their practice.

## **\*PRACTICE DRESS CODE**

*All athletes must:*

1. Maintain a well-groomed appearance and good personal hygiene at all times.
2. Hair must be kept out of the face (if possible in high ponytail) and a bow worn at all times.
3. Nails must be kept shorter than fingertips when participating in any physical PBL activity.
4. No jewelry (other than approved medical ID tags) is allowed when wearing any PBL practice, warm up, or competition uniform.
5. Sports bras and bloomers/briefs are to worn by female athletes under all practice wear and uniforms.
6. No tattoos, body piercings, or inappropriately dyed or cut hairstyles should be visible when wearing any PBL apparel.

## **\*COMPETITION DRESS CODE**

*By each team's scheduled meeting time:*

1. Athletes must dress in their standard issued "PBL" competition uniform:

GIRLS	BOYS
Uniform top & skirt	Shoulder bag
Shoulder bag	Uniform pants & top
Briefs	White socks (no show)
Bow	White Infinity sneakers
White Socks (no show)	Warm up pants
White Reebok hi-top sneakers	Warm up jacket
Warm up pants	Black PBL competition shirt
Warm up jacket	
Black PBL competition shirt	

2. All hair and make-up must be completed as per coach's request.
3. All jewelry (except approved medical ID tags) and colored nail polish must be removed.
4. All non-uniform items such as sunglasses, cell phones, and iPods must be put away.
5. All lost or noticeably damaged uniform items must be repurchased immediately and a matching substitute worn until the item is replaced.

*Any braces or tape needed to perform must be supplied by the athlete and put on before going to warm up mat.*

*After competing:*

1. Athletes may only change into their black PBL competition shirt and warm ups.
2. No skirts may be worn over warm up pants.
3. Socks and sneakers must be worn at all times.
4. During awards ceremonies, athletes must be in full competition uniform and may not wear shoulder bags, warm ups, or any other items.

## **\*SPORTSMANSHIP/CONDUCT**

*All athletes AND parents must always:*

1. Set a positive example for others to follow.
2. Refrain from gossiping or any other form of verbal or physical confrontation.
3. Be respectful and courteous to everyone.
4. Schedule an appointment to speak with a coach or other staff member to discuss any issues that may arise.
5. Refrain from celebrating the misfortune or defeat of another person, team, or program.
6. Accept team placements and awards with dignity and class.

## **\*HEALTH**

*All athletes must:*

1. Provide PBL with current health insurance and emergency contact information.
2. Inform PBL of all medical conditions that may limit or prevent their ability to participate in any PBL activities.
3. Notify PBL of any injuries sustained as a result of their participation in any sanctioned PBL activities.

4. Provide valid written documentation from a doctor explaining the reason(s) and the duration for which they may be limited or unable to participate in any PBL activities.
5. Refrain from the illegal use of drugs, alcohol, tobacco, or any other substances.

## **\*FINANCIAL OBLIGATIONS**

*All athletes and parents understand that:*

They assume full responsibility for all costs incurred as a member of PBL including but not limited to: gym registration, monthly tuition, practice outfits, uniforms, competition, or any other item(s), or services purchased or rendered to PBL and the payment in full of those items regardless of any circumstances that may arise such as dismissal from the team, or disbandment of the team.

### 1. TUITION PAYMENTS

- a. Monthly tuition payments are due on the 1<sup>st</sup> of each month (regardless of what day of the week that falls on or whether or not you received your invoice).
- b. PBL collects monthly tuition by directly billing your credit, debit card or checking account for the amount indicated and your total charges will appear on your monthly credit, debit or checking statement.
- c. Mandatory auto-draft payments will begin June 1, 2011.
- d. First two months tuition is due upon registration after tryouts.
- e. Tuition does not fluctuate based on the number or duration of practices in any month.
- f. Monthly payment for normal tuition rate is due from May 2011 through April 2012.
- g. A \$30.00 late fee will be assessed on the 5<sup>th</sup> of each month in the event that a tuition payment is past due.
- h. There will be no pro-rating for gym closures, missed practices, or vacations.

### 2. ADDITIONAL FEES (Uniform, makeup, choreography, music, etc)

- a. No items will be ordered (uniform, make-up, bows, etc.) unless paid for in full by the deadlines given.
- b. All payment due dates must be met.
- c. Automatic payments deductions will be made against either a credit card or a check card if payments have not been made within 30 days of the payment due dates.
- d. Any payment attempts resulting in a NSF (non-sufficient funds), declined credit card, expired credit card, returned check, etc. will incur \$25.00 service charge. It is your responsibility to update your information with us if there are any changes (card number, exp. date, etc.).
- e. An athlete's account must be current and in good standing to participate in practices, competitions, and/or special events.
- f. PBL reserves the right to remove an athlete from their team at any time for failure to keep up with financial obligations.
- g. Any monies from an athlete /parent will be applied first to any overdue tuition/fees. All tuition/fees must be current before an athlete may collect any clothing, uniform or other retail items.
- h. If an athlete chooses to leave or if asked to leave PBL for any reason before the season is over, any and all funds are completely non-refundable and no merchandise will be given. Again, there will be NO refunds!!
- i. If there is a balance and the athlete decides, for whatever reason, to discontinue participation on a *Palm Beach Lightning* team, that athlete is still responsible to pay all outstanding balances.

- j. PBL reserves the right to turn over all delinquent accounts to a collection agency and parents/athletes are responsible to pay all additional costs incurred.
- k. When an individual quits the team mid-season, a hardship is created for the coaches and remaining team members, as routines and positions have to be reworked, often resulting in extra practices and lost productivity. As such, if a team member quits or is removed from the team for any reason other than family relocation of 100+ miles away or *extreme* circumstances, the following penalties will apply in addition to balances owed:
  - Quit between May 1<sup>st</sup> and July 31<sup>st</sup> = \$200
  - Quit between August 1<sup>st</sup> and October 31<sup>st</sup> = \$300
  - Quit between November 1<sup>st</sup> and March 31<sup>st</sup> = \$400

**The PBL Credit Card Authorization form must be completed at the time of registration. You will not be able to join the team without a valid credit card on file – Without a valid credit card, the only option to join the team would be to pay 50% of the year's entire fees in advance, and the remaining 50% is due mid-way thru the season**

## **\*TRAVEL**

1. The GYM will block rooms for team travel at all away competitions. Once rooms are blocked, parents will need to call the hotel and book their reservation. The hotel will only hold the rooms for so long. Parents will need to make sure they book their reservations before the set date to ensure they have a room.
2. It is your responsibility to pay the hotel directly for your room.
3. In order for us to keep our coaches fees to a minimal it is mandatory that all athletes and parents stay at the assigned hotels for competitions. The larger the room block is, the less the hotel cost. We understand that individuals can find hotels cheaper but you must realize we are a team and we need to ensure that 70+ people have a room during the competition at a reasonable rate. We also negotiate hotel contracts where we get try to get “comp” rooms for the coaches. We do not make commissions off of the bookings or get free rooms for ourselves. As owners we share a room and we make the coaches share too.
4. Not staying at the same hotel causes confusion and unnecessary conflict. If PBL loses a “comp” room because some parents decide to stay at a different hotel or do their own block of rooms, those parents will be charged a non-refundable \$50 fee for each competition it occurs.

*The rules and regulations are set forth to establish the best possible environment to develop the participants physically, mentally, emotionally and morally. Strict adherence to these rules and regulations are mandatory.*

*Any team member or parent that breaks these rules or acts in a manner that jeopardizes the name and reputation of the Palm Beach Lightning Allstars will be subject to removal from the program. The coaches, advisors and staff members reserve the right to augment these guidelines as deemed necessary during the season if it is for the best interest of the teams and their respective members. Remember: decisions are made for what is best for the team not what is best for the individual!*

*As a parent you may or may not agree with every decision made for the team. However, you must be willing to trust in the staff and be assured that every decision made will be in the best interest of the team and its members. We realize that this program will not be perfect, but as an organization we will continue to strive to make this year an enjoyable and rewarding experience for everyone.*

***PALM BEACH LIGHTNING ALLSTARS  
2011 – 2012  
TEAM AGREEMENT FORM***

**ATHLETE'S NAME** \_\_\_\_\_

- \*I have read the packet in its entirety.**
- \*I have looked at competition dates and will be available to attend.**
- \*I have read and agree with the financial plan for the 2011-2012 Season.**
- \*I have read and agree with the attendance expectations and policies.**
- \*I have read and will abide by the rules and regulations set forth by Palm Beach Lightning, Inc.**
- \*I understand that all fees are non-refundable.**

\_\_\_\_\_  
Team member's printed name

\_\_\_\_\_  
Team member's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's printed name

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date

**Official Notary Seal**

\_\_\_\_\_  
**Notary's signature**

\_\_\_\_\_  
**Date**

# ***PALM BEACH LIGHTNING ALLSTARS***

## ***2011 – 2012***

### **AUTO DEBIT AUTHORIZATION FORM**

**Every athlete MUST turn this form in with a voided check.**

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

#### **Bank Information**

Name of Bank or Financial Institution:

\_\_\_\_\_

Bank Account Number:

\_\_\_\_\_

Bank Routing Number:

\_\_\_\_\_

Name as it appears on the account:

\_\_\_\_\_

Address as it appears on the account:

\_\_\_\_\_

\_\_\_\_\_  
(City, State, Zip)

Phone Number: \_\_\_\_\_

Alternate Number: \_\_\_\_\_

I have read and understand the financial policies of the Palm Beach Lightning Allstars. I am authorized to sign on the account listed above and I certify that all the information above is complete and accurate. I hereby authorize the Palm Beach Lightning Allstars to collect payment for fees due by processing a debit to the account listed above on the first of each month. I understand that if the debit should be returned, a \$25.00 returned item fee would be assessed.

Name (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_

# ***PALM BEACH LIGHTNING ALLSTARS***

## ***2011 – 2012***

### **CREDIT CARD AUTHORIZATION FORM**

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

#### **Cardholder Information**

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

Card type: \_\_\_\_\_ Visa \_\_\_\_\_ MC \_\_\_\_\_ American Express \_\_\_\_\_ Debit

Credit card account number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration date: \_\_\_\_\_ / \_\_\_\_\_ Security code: \_\_\_\_\_

Address where statement is mailed:

\_\_\_\_\_  
\_\_\_\_\_

(city, state, zip)

Phone number: \_\_\_\_\_ Alternate number: \_\_\_\_\_

Please choose one of the following:

\_\_\_\_\_ Only charge my credit card if I haven't made payment by due date.

\_\_\_\_\_ Please charge my credit card on the payment due dates.

I have read and understand the financial policies of the *Palm Beach Lightning Allstars*.. I am a duly authorized credit card user on the identified account and authorize all of the above with my signature. I certify that all the above information is complete and accurate. I hereby authorize *Palm Beach Lightning Allstars* and to collect payment for fees due by processing a charge to the credit card listed above.

Cardholder name (printed): \_\_\_\_\_

Cardholder signature: \_\_\_\_\_

# ***PALM BEACH LIGHTNING ALLSTARS***

## ***2011 - 2012***

### **SPONSORSHIP FORM**

Dear Community Supporter,

The *Palm Beach Lightning Allstars* would like to ask for your support by becoming a sponsor of one of our students in our cheerleading scholarship program. We will be attending many Regional, State, and National competitions and exhibitions throughout the state of Florida. To compete in these competitions there are many expenses for each participant. Some of the travel expenses are in excess of \$1500.00 per year. Support is needed from the community, parents, and coaches who are dedicated to developing these athletes. Most important, it takes a great deal of dedication and desire from the athlete. These athletes practice two to three times a week while maintaining their grade point averages, keeping up with school projects and social activities. In addition to the many community activities they participate in, they learn dedication, responsibility, and teamwork, all of which these children will use in their future. You can help make it possible for them to continue on this positive path through life.

We have a lot of goals to reach! We can only reach these goals with the support of our community members and businesses such as you. If you can help, please make your donation payable to *PBL ALLSTARS*. A contribution of any size will be greatly appreciated. If you are donating specifically for one individual, please note that on your donation in the memo area. Your donations will then go only towards the individual you are sponsoring and are not used for any other purpose.

Again, thank you for your consideration. We look forward to working with you as a team to make this a championship year!

# ***PALM BEACH LIGHTNING ALLSTARS 2011 -2012***

*Your financial support and the athletes dedication can turn dreams into reality! No donation is too small!*

SPONSOR TYPE:

Individual: \_\_\_\_\_

Corporate: \_\_\_\_\_

( ) Athlete's Name: \_\_\_\_\_

( ) Use my contribution on an as needed basis for those individual athletes with the most needs.

Please return this form with your check made payable to ***Palm Beach Lightning.***

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

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

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

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Amount Contributed: \$ \_\_\_\_\_

***OUR ATHLETES THANK YOU FOR YOUR SUPPORT!***

**SEND PAYMENTS TO:**

PALM BEACH LIGHTNING - P.O.BOX 14752 – NORTH PALM BEACH – FL - 33408