

R-espect
U-nitv
S-upport
H-onor

WEST COAST RUSH

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WEST COAST RUSH

MID-SEASON PERFORMANCE TEAM

WHAT IS A MID-SEASON PERFORMANCE TEAM?

This is the BEST place to start your cheerleading experience. It's a taste of competitive cheerleading but on a smaller scale! Easier time commitment, less financial commitment, but just as much FUN!!! Our Mid Season Performance teams will begin November 1st, 2011 and run through April 15, 2012. Performance Teams will perform in 2-3 local competitions.

WHAT ARE THE FEES AND WHAT DOES IT INCLUDE?

Season Period: November 7 – April 30

Season Total: \$950

Down Payment Due upon Sign up: \$298

Payment Schedule: \$163 payments due December 1st, January 1st, February 1st, March 1st

Includes: Weekly cheer/tumbling practices, FREE OPEN GYM, Special Tumbling Class Discount Rate, Practice outfit, Competition Tee, Complete Competition Uniform Package (Skirt, Top, Briefs, Bow & Shoes), Routine Fees, Choreography Fees and 2-3 Local Competitions.

WHO CAN BE ON THE TEAM?

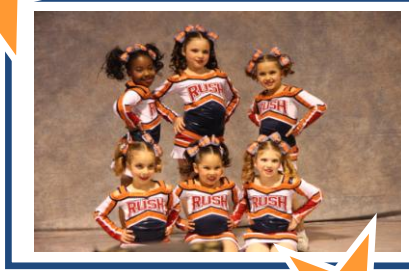
We are offering this team to Boys and Girls ages 4-18 – All Ability Levels Welcome
Teams will be split by age; however, teams will be combined if necessary based on enrollment.

HOW DO I JOIN?

Simply join us for our Info Meeting on October 29th @ 11am. Immediately following the info meeting, we will evaluate each student. Remember, this will be a stress FREE and fun evaluation and NO ONE will get cut!

Evaluation Fee: \$25 (*Pre-register by October 24 and receive \$5 discount*)

Signup Discount: Signup between October 30 – November 4 and receive a \$25 discount on your first payment.



Join us for our
Info Meeting &
Evaluations on
**October 29th @
11am.**

For Office Use Only:

____ Evaluation Fee \$20

____ Cash/Check/CC

____ Application

____ Birth Certificate

____ Physical

WEST COAST RUSH APPLICATION '11 - '12

EVERYONE MAKES A TEAM!!!

R-respect, U-nity, S-upport, H-onor

ONE FAMILY...ONE CROWN!!!

**PLEASE ATTACH PHOTO
HERE**

**YOU MUST BE THE ONLY
PERSON IN THE PICTURE.**

1 Athlete's Name: _____ Athlete's Email: _____

Home Address: _____ City/State/Zip: _____

Home Phone #: _____ Member's Cell Phn #: _____

Mother's Name: _____ Father's Name: _____

Mother's Cell #: _____ Father's Cell #: _____

I am a: NEW RETURNING MEMBER

Age on August 31, 2011: _____ Birthday: ____/____/____ Grade Level: 2011-12: _____

T-shirt Size YS, YM, YL, AS, AM, AL	Shorts Size YS, YM, YL, AS, AM, AL	Shoe Size

What School will you be attending? : _____

2 **Billing Information:** (Please enter the billing name and address if different from above)

Parent/Guardian Name(s) : _____ Parent Email Address: _____

Home Address: _____ City/State/Zip: _____

How did you hear about West Coast Rush? _____

What positive qualities do you have that would be an asset to the team? _____

3 **AFTER READING THE WEST COAST RUSH COMMITMENT PACKET,** please discuss and evaluate the following requirements. If in agreement, both parent and athlete need to initial each item.

Parent Athlete

_____ 1. I understand that I must maintain the required eligibility standards in order to stay on the squad. In addition, I know that I must work hard and be dedicated in order to earn the right to perform. Each member of the team depends fully on the other members to participate.

_____ 2. I understand that each member will be responsible for certain financial obligations that cover expenses such as tuition, uniforms, choreography, events, competitions, etc.

_____ 3. I understand that my attitude, commitment, and enthusiasm are just as important as the physical skills involved in cheerleading. I will represent West Coast Rush in the best way possible, and be a good example to all those around me and in my community.

_____ 4. We, participant and Parent(s)/Guardian(s) have thoroughly read the West Coast Rush Commitment Packet and clearly understand the expectations, rules and commitment necessary to be a West Coast Rush All-Star Cheerleader. Fulfilling the responsibilities of an all-star squad member should be a joint effort of the athlete and parent together. We promise to abide by this Commitment and we understand that if we do not abide by these expectations, it is cause for removal from the team.

4 Participant Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Medical Treatment Authorization And Liability Release

For Office Use Only:
IClassPro _____
Input _____

Athlete Name: _____ Athlete Birth Date: _____
Address: _____ Athlete Cell: _____
City/State/Zip: _____ Home Phone: _____
Mother's Name: _____ Cell Phone: _____
Father's Name: _____ Cell Phone: _____
Emergency Name: _____ Emergency #: _____
Parent Email: _____ Athlete Email: _____

Allergic to the following Medications: _____

Any known history of medical problems? _____

I, the undersigned parent or guardian, do hereby grant permission for my daughter/son, _____, to participate in the sport of cheerleading at Spirit Explosion event. In order that my daughter/son may receive the necessary medical treatment in the event she/he may sustain injury or illness during participation in this sport, I hereby authorize the cheerleading coach or other supervising adult to obtain medical treatment for my daughter/son for such injury or illness during the sport, and I hereby hold West Coast Rush and any of its representatives harmless in the exercise of authority.

I understand that this sport involves risk to the participant. I further acknowledge and understand that due to the nature of this sport, which involves inversion and rotation of the body, there is a possibility that my daughter/son may sustain physical illness or injury (minimal, serious, or catastrophic), in connection with her or his participation. I further acknowledge and understand that my daughter/son is assuming the risk of such physical illness or injury by her/his participation, and I further release West Coast Rush and its representatives from any claims for personal illness or injury that my daughter/son may sustain during participation in this sport.

I further understand that West Coast Rush has established rules and regulations pertaining to conduct, behavior, and activities of all student and cheerleading participants, by which my daughter/son must abide during participation in this sport, and that my daughter/son and I will be responsible for her/his failure to abide by those rules and regulations.

I understand that West Coast Rush produces promotional material about their event. I understand that my son/daughter may be included in videotape or photography taken during this season. I hereby grant West Coast Rush, its successors, assignees, licensees, sponsors, any television networks and all other commercial exhibitors the exclusive right to photograph and/or video tape my son/daughter and further to utilize my son/daughter's name, face, likeness, voice and appearance as part of the program, and in advertising and promotion of the of the season or program, without reservation or limitation. In granting this license, I understand that West Coast Rush is under no obligation to exercise any of its rights, licenses and privileges herein granted.

My daughter/son and I have read and understood the above Medical Treatment Authorization and Liability Release.

Doctor: _____ Phone: _____

Insurance Carrier: _____ Policy Number: _____

Signature of Parent or Guardian (if athlete is under 18)

Date

Participant's Signature

Date