





IMPACT Half-Year Team Information - Prep & Novice Program (One 2 hr. practice per week) December 2025 – May 2026

Practices will begin the week of December 1st, 2025 Exact practice days and times will be determined after Team Placement.

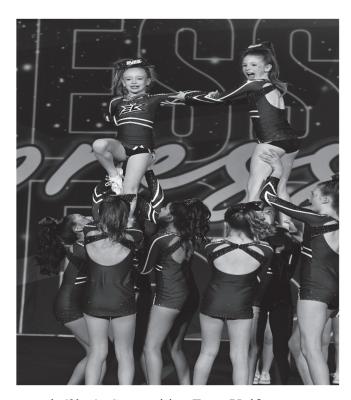
Pricing

MONTH	FEE
December*	\$210
January **	\$210
February***	\$210
March	\$210
April	\$210
May	\$210

^{*}Administration Fee - \$75

December payment & Administration Fee is due at the time of turning in the packet, along with the Yearly Registration Fee \$60 (if needed).

ALL payments must be made prior to signing up.



<u>Please note that the monthly fees include:</u> One Team Practice per week (2hrs), Competition Fees, Uniform Rental.

<u>Not included</u>: Bow \$20, Choreography and Music \$100, Coaches Travel Fee & Travel Apparel \$150 and Registration Fee (if needed).

Athletes may add an additional tumbling or specialty skills class for a 50% discount.

Tuition is due on the 20th of each month prior to the month you will be attending. For example, September's tuition is due by August 20th.

All tuition payments are considered late on the 1st of the month and a Late Fee of \$25 will be assessed.

Additional Information

All teams will compete at an out-of-town event and you will be responsible for travel, lodging, meals, etc.

^{**} Competition Bow- \$20 and Choreography/ Music Fee- \$100

^{***}Coaches Travel Fee & Travel Apparel - \$150

HALF YEAR



2025-2026 Important Dates

Please Check ALL CLOSING Dates Carefully

Important Events and Closing Dates:

DECEMBER 1st – TEAM PRACTICES BEGIN

December 19th- January 5th - Closed for Winter Break

JANUARY 6TH – TEAM PRACTICES RESUME

January 19th – Closed for MLK February 16th – Closed for Presidents Day March 14th- 23rd – Closed for Spring Break

MARCH 23rd – TEAM PRACTICES RESUME

April 3rd-5th – Closed for Good Friday & Easter May TBD – Tryouts

Competition Dates:

January 31st - February 1st - MEGA Nationals, Garland, TX
March 28th- March Madness - Garland, TX
April 11th - 12th - Glow Tour - Frisco, TX
May 9th - 10th - Open Championship - Galveston, TX



Please remember that these dates are tentative.

Practices and Events can be added, deleted, or substituted without notice.



Absences

Absence Policy

An Absence Request Form must be submitted and approved TWO weeks prior to the absence. All absence requests submitted less than two weeks prior to the absence will be unexcused. Forms are in the lobby and in our document section on our website. Be prepared to show documentation for absences. NO absences are permitted one week prior to an event or during the week of an event, excused or unexcused. No unexcused absence will be allowed at any practice that involves choreography. An excused absence is limited to mandatory school functions for a grade, death in the family or contagious illness (fever, vomiting, diarrhea). We will verify with school administrators or the school if we think someone is being dishonest. Exceeding the 2 unexcused absences allowed will put your athlete's position on the team in jeopardy at the coach's discretion. Missing practice for any other reason than those listed above will result in an unexcused absence. This includes but is not limited to; homework, no ride, Rising 6th Graders/Freshman, National Charity League, etc. All other sports that conflict with Express practices are NOT EXCUSED. Athletes who are late or miss practice may be required to condition at the following practice.

All athletes must attend practice even when they are sick (not contagious). Athletes may not be required to participate but must be present and must provide a doctor's note with detailed information regarding illness, treatment, and length



of recovery. This includes dental, medical and all other mental or physical health related issues that would prohibit an athlete from participating. Extended sicknesses or injuries may jeopardize an athlete's position on the team. Athletes may also be removed from their team and the program for not following the Absence Policy. Understanding that this is a team sport is key. Commitment from all athletes for all practices is the only way we can set our teams up to have a successful season.

Competition & Event Absence Policy

ALL COMPETITIONS AND EVENTS ARE MANDATORY. Missing an event or competition will result in the athlete being placed in an alternate position or removal from the team. Do not plan family vacations or trips during or around competitions/events, if you have done so you must inform Express Cheer in writing before you are admitted onto a team. Understand that this is a team sport and that if one person is missing, it is basically a waste of time for everyone else. Missing or skipping practices, as well as excessive tardiness, will jeopardize your athlete's role on the team.

NO ABSENCE WILL BE ALLOWED THE WEEK PRIOR TO ANY EVENT/ COMPETITION. Missing practice during these weeks may result in the athlete being moved to an alternate position or being dismissed from the team.

Code of Conduct

It is understood that Express Cheer reserves the right to dismiss an athlete from any practice or remove them from a team if their behavior is deemed inappropriate.

A member of Express Cheer must always be a strong representative. We expect that you will always keep your social media clean and family friendly. Remember you are a direct reflection of Express Cheer. If you are caught demonstrating abusive behavior, lying, or any form of negative behavior it will be potential grounds for removal. Express Cheer will not tolerate gossiping, pettiness, back talking or any disrespect to teammates or instructors. After warning a team member, a parent will be notified of the problem. If the issue is not resolved it will be potential grounds for removal.

Please be aware that inappropriate displays of behavior FROM PARENTS to office staff, instructors, athletes or other parents at events or inside Express Cheer can also result in removal of athletes from teams.

The use of Spirit Athletics LLC, Express Cheer DBA or any other subsidiary of our companies is strictly prohibited. It is prohibited to use our name in emails, social media formats, apparel, or other promotional material. No portion of our routines, music, dances, stunts, transitions, etc., should ever be used in any forum outside of our program.

HALF YEAR



IMPACT Elite HALF YEAR - Tryout Form

Athlete's Name:	_Birth Year:	
Athlete's Email:		_
Date of Birth:		
2025-2026 Grade:		
School:		
Do you have any kind of Cheer Experience	? Yes	No
If yes, what kind? (Example: Sideline Cheer, Different Cheer Gym, Novice Tear	m, Prep Team, etc.)	
Do you cheer for your school? Ye If yes, which squad?		
Parent name (s):		-
Parent's Email:		_
Please Initial: I am aware that the Express - IMPACT Elite HALF town and understand I will be responsible for all trav		s travel c



Acceptance of Terms & Conditions

Please take a moment and read carefully to ensure that you fully understand the time and financial commitment required for Express. You will need to initial each section and sign at the bottom of the page.

Date
onditions within the Express Cheer Evaluation Packet.
(parent), understand, accept, and agree to all of the onditions within the Express Cheer Evaluation Packet.
I understand that team practices cannot be made up and in the event that practices are cancelled or there are global or local events out of the control of Spirit Athletics LLC (DBA – Express Cheer & Dance) or its subsidiaries, that limit our ability to provide services, I will be responsible for the duration of my contract and Spirit Athletics LLC (DBA – Express Cheer & Dance) or its subsidiaries will do everything in their power to provide substitute services and to make each family/customer whole.
Please be aware that inappropriate displays of behavior from parents can also result in removal of athletes from teams. This applies in all situations. Including, but are not limited to: practices, performances and competitions.
It is understood that Express reserves the right to move your child to another team during the season and/or dismiss an athlete from any practice or remove them from a team if their behavior or parents' behavior is deemed inappropriate. In the instance that an athlete quits or gets dismissed from a team, a \$750 cancellation fee will be processed immediately.
Tuition does not pay for the right to perform. Individuals must continue to meet the skill level requirements Failure to pay tuition will result in an athlete sitting out of practice.
Express Cheer athletes are required to attend all Events and Competitions. Everyone will receive an Event and Competition schedule and if you cannot attend any of the Events or Competitions, then you should not join the team.
 ♦ Work ♦ School Sports ♦ Cotillion
 Too much home work / studying (please plan ahead) Don't have a ride (again, please plan ahead)
An excused absence is limited to mandatory school functions for a grade, death in the family or contagious illness. Missing practice for any other reason other than the four listed previously will also result in an UNEXCUSED absence. This includes, but is not limited to:
Express athletes are required to attend all practices. If habitual absences occur; athletes may be removed from the team without notice and no refund will be provided. Also, please note that if an athlete misses practices the week prior to a performance, regional or local event or competition, and/or two weeks prior to a national competition it is at the discretion of Express and its coaches whether or not they perform.
If a student is injured or sick and not contagious, they are required to attend practice, not participate.
You must advise your coach in advance if your child will be arriving late or leaving early from practices.
I understand that I will forfeit any monies paid if I choose to leave a team or are asked to leave the program. I also understand that I am entering into the Express program of my own free will. There are NO REFUNDS!

Payment Contract Agreement

tudent's Namo	2:				
arent's Name:	:				
hone Number	:	E-Mail Addı	ress:		
ome Address:		City:	State:	_Zip:	
(parent's initials)	I acknowledge that, under charged a registration fee of month prior. If fees are no	once a year and all to	uition will be p	ayable on the 20th	h of each
(parent's initials)	Tuition does not change ba	ased on the number	or length of pra	actices in any mo	nth.
parent's initials)	It is also acknowledged tha ME OF ANY OBLIGATION NO REFUNDS OR MAKE NON-ATTENDANCE OR to pay for all uniform piece	ONS TO PAY THE T E-UP CLASSES FO WITHDRAWAL.	TUITON AGR R TUITON PA I further ackno	EED UPON, AN AID SHALL BE I will be should be	ID THAT MADE FO Il be requi
parent's initials)	I further acknowledge that reason, I may be responsibl writing.				
parent's initials)	I understand that if my athlereason, their uniform will not returned, I will be	eed to be returned w	vithin one weel	k of their resignar	
parent's initials)	In addition, I understand by credit card on file for any or cancellation fee of \$750.				
parent's initials)	I understand that carrying a taking additional classes or addition, if monthly tuition out of practice until the acco	private lessons until is not paid by the 1 ^s	l team tuition h	as been paid. In	
parent's initials)	I acknowledge the monthly interest, penalties, unbilled a agree to pay additional char necessary to collect the amount of the second se	attorneys' fees, etc.) ges or fees which ar	upon signing to the incurred if it	this agreement I	2
parent's initials)	I understand that if any instaright to continue with the concessary to recover the full cancellation of this agreement all Express Cheer related ac	ollections process and amount of debt inc ent and/or exclusion	nd take whateve luding but not	er action is deeme limited to	ed
(parent's initials)	I acknowledge that I must a	lways have two form	ms of payment	on file.	

Parent/Guardian Signature



Authorization Agreement for Collections

(Name) hereby authorize Express Cheer to automatically bill my credit
card/bank account my athlete's monthly tuition and any and all fees associated with his/her classes/squad. All requested information is required. Each month, your credit card /bank account will be billed for the amount indicated and your charges will appear on your statement. Any athlete/parent who wishes to change or cease payments entirely from the automatic payment system must notify Express Cheer in writing no less than 2 weeks prior to the automatic debit date. It is the cardholder's responsibility to maintain the correct information. We acknowledge that the origination of transactions to our account must comply with the provisions of the U.S. law. Please note that you are required to put both forms of payment on file. You may check the type of payment you would like us to first process. Express reserves the right to process the second form of payment if
your primary payment is declined.
Monthly Tuition is due on or before the 20 th prior to each month.
A late fee of \$25 will be assessed for payments received after the 1st of each month unless prior arrangements have been made.
<u>Customer Information:</u>
Name:
Athlete's Name:
<u>Credit Card Information</u> Please use this as my primary payment.
Account Number: Exp. Date: Security Code:
Billing Address associated with credit card:
Town: St: Zip:
Bank Account Information Please use this as my primary payment.
Name on Account
Name of the Banking Institution
Routing Number
Account Number
I authorize, Express Cheer to automatically charge my credit card/bank account on file in the amount due, each month. I understand that my payment is to be withdrawn on the 20^{th} of each month prior.



	EXPRE	IEER	heck one:	New Studen		ibling L	_ Returnin	g Stud	dent
	JARDIAN ardian First			nsible for the accou dian Last Name	int)	Cell Pho	ne Number	All	ow Texting
Father/Gu	ardian First	Name	Father/Guard	dian Last Name		Cell Pho	ne Number	All	ow Texting
		Mailing A	Address			(City, State, Zip (Code	
]	Parent Drivers Lico	ense and Date of	Birth			Email Addre	SS	
		TION (One Form							
Studen	t's First Nar	ne	Stuc	dent's Last name			Birth date		Age
Gender	1		Medical Conditio	ons, Disabilities, Aller	oies Issues	and/or Co	ncerns		
Gender		1	vicuicai Conditio	ns, Disabilities, Alici	gies, issues,	and/or co	neer ns		
CLASS REG	ISTRATIC	ON & FEES			Sta	ut Doto			
						rt Date			
Class #2						rt Date			
Class #3						Start Date			
Class #4	 	mant Fac	1	st Months Tuition	Sta	rt Date	Dogular Monthl	v Tuitic	n
All	illuai Elli olli	пент гее	1	st Months Tultion		Regular Monthly Tuition			
In consideration of above enrolled acti event conditions ar including permaner	the above name vities and that I we unsafe, I or my nt disability, par	d students/participants p am or my children are q y children will immediat alysis and death, which	participating in the pro- ualified, in good health ely discontinue partici may be caused by my	grams of Express Cheer, a Sept., and in proper physical collipation in the activities. I full or my children's own action ow; and that there may be of	Spirit Athletics ondition to partially understand ns, or inactions	company, I re icipate in such that these actives, those of othe	epresent that I underst activities. I acknowled vities involve risks of ers participating in the	and the nated get that it is serious be activities	ature of the if I believe odily injury, s, the conditions
employees, other p "RELEASEES' he	articipants, any rein) from all lia im against any c	sponsors, advertisers, an bility, claims, demands,	d if applicable, owner losses, or damages, or	ics LLC, its respective owners and lessors of premises or in my account caused or alle old harmless each of the Rel	n which the Ac eged to be caus	tivity takes pla ed in whole or	ace, (each considered in assumption of risk	one of the	one on my
during activities he form deemed accep	eld at Express Chotable by Expres	neer or any public event	that includes Express e and discharge Expres	'MEDIA'' herein) taken by e Cheer, for use in whole or i ss Cheer, Spirit Athletics LI therein at no charge.	in part, in mark	eting, social m	nedia and/or training i	naterial o	r any other
(maximum of \$90 guaranteed and are	per family) is du available only i	e on each anniversary da	ate of enrollment. Cla s. To qualify for mak	20 will be access for any late ass Make Ups must be arrange ups, students must be action	nged arranged b	y contacting th	he main office staff.	Make Up	s are not
substantial rights b	y signing it and	have signed it freely and	d without any inducer	OF RISK, INDEMNITY A ment or assurance of any na ent is held to be invalid the	ature and intend	d it to be a con	mplete and uncondition	onal releas	se of all liability
	Pa	rent/Guardian Signature					Date		
OFFICE US	-	rent/Guardian Signature System Entry		Follow Up Email			Date		



City of Dallas

Park and Recreation Department (DPR)

CREDIT CARD AUTO DEBIT AUTHORIZATION FORM

Na	me on Card:			
Cre	edit Card Number (First 4 and last 2 digits o	only):	XXXX-XXXX-XX	
Car	rd Type:	lasterCard Ex	piration Date: Month/Year:	/
Em	ail:			
her	vacy and Security Statement: It is the policy of (e will NOT be sold or distributed to any party. Wormation. Security protocols have been implement	Ve maintain strict inte	ernal policies against unauthorize	d disclosure or use of customer
	Participant's Name(s):	Program Title (i	.e. After School Program)	Recreation Center (i.e. Kidd Springs)
Parti	cipant 1			
Parti	cipant 2			
Parti	cipant 3			
Parti	cipant 4			
		ACKNOWLE	DGEMENT	
Initia	ls:			
[] I hereby authorize City of Dallas DPR to autom the 1st Monday) for any other program.	atically debit my accour	nt weekly (every Friday) for After Scho	ool Program/Summer Camp or monthly (on
[] I understand that the amount being debited w	ill only cover the progra	m fee due and will not cover any pre	vious bill, late fees, membership fees, etc.
]] I understand I am responsible for keeping Cred	dit Card information upo	lated (i.e. expiration dates, replacem	ent cards, etc.).
]	I understand that if my card is declined, there payment is made in full.	may be a \$5.00 late fee	assessed, and the participant will no	t be eligible to attend the program until
Ī	I understand that if my card is declined two (2 payment in advance to secure a spot in the pro		ill be removed from the Auto Debit P	ayment Plan and will need to make full
I] I acknowledge that this auto pay authorization in writing fifteen (15) days in advance.	will be in effect until ca	ncelled. To cancel future auto debit	s, I will notify appropriate Center Manager
] I understand that there are no prorated option	is for this program, fees	are charged in full whether participa	ant is present or not.
] I understand that a valid email is required to be receipts.	e on file as this is how I	will receive all communications abou	it my Auto Debit Payment Plan, including
RINT	NAME	DATE	City of Dallas DPR R	epresentative Signature
			Authorization form	reviewed by City of Dallas DPR
IGNA	TURE		Representative (dat	e)

TEAM REPRESENTATIVE FORM

List All phone contacts where you can be reached ANY TIME!

NAME OF ATHLETE	DOB	AGE
NAME OF PARENT OR LEGAL GUAR	RDIAN	
MOM/GUARDIAN'S CELL PHONE		
MOM/GUARDIAN'S E-MAIL		
DAD/GUARDIAN'S CELL PHONE		
DAD/GUARDIAN'S E-MAIL		
ATHLETE'S CELL PHONE		
ATHLETE'S E-MAIL		
ATHLETE'S JACKET SIZE	ATHI	LETE'S SWEATSHIRT SIZE
MEDICAL CONDITIONS, DISABILITI	ES, ALLERGIES AND/OR CO	NCERNS
EMERGENCY CONTACT NAME & PH	IONE	
Express Cheer & Dance Competition	n Release Waiver:	
 I,	ivities without my presence. elow for said activities, I wil	l be required to be present at me provided in competition
Parent Print & Signature		Date
Athlete Print & Signature		Date



ABSENCE REQUEST FORM

NAME	NAME OF ATHLETE:			DATE:			
TEAM	[:						
REQU	ESTING TO BE ABSI	ENT:					
MONT	ГН:	DAY:		_TIME:			
SCHO	OL ACTIVITY:						
VACA	TION/OTHER:						
WILL	YOU BE ABLE TO A	TTEND ANY PORTI	ON OF THE	SCHEDULED PRAC	CTICE?		
YES	- OR - NO						
IS SO	WHICH PART?						
(athlete's initials)	I KNOW THAT SC EXCUSED ABSENC	HOOL RELATED A	CTIVITIES I	FOR A GRADE ARE	THE ONLY		
athlete's initials)	I AM AWARE THA PRACTICE.	T MY ABSENCE CA	AN AND WIL	L AFFECT THE RES	ST OF THE TEAM		
(athlete's initials)		PARTICULAR STU LL SPACING AND F					
(athlete's initials)	I PROMISE TO LEAPRACTICE.	ARN ANY NEW OR	CHANGED N	MATERIAL PRIOR	ΓΟ MY NEXT		
athlete's initials)		NAPPROVED ABSE MEMBER OF A TE		EOPARDIZE AN A	THLETE'S POSITION		
ATHL	ETE'S NAME		PARENT	'S NAME			
ATHI	FTE'S SIGNATURE		DADENT'	SSIGNATIRE			