

# EXPRESS CHEER

*All Star After Football Season*



AL  
ER

The logo for AFS (All Star Football) is written in a bold, green, sans-serif font with a slight shadow effect.

**EXPRESS – Elite All Star (After Football Season) Team Information**  
**(One 2 hr. practice per week)**  
**November 2026 – May 2027**

**Tryouts: November 14<sup>th</sup>**  
**Mandatory Choreography: December 5<sup>th</sup>**

Practices begin the week of November 16<sup>th</sup>, 2026,

Exact practice days and times will be determined after Team Placement.

**Evaluation Process**

Athletes will have a chance to show us everything we need to see during the evaluation process. Athletes must be able to perform skills with superior technique to be considered for the team. Please refer to **Skill Recommendations Sheet** – athletes must have Level 2 or higher skills. Athletes without Level 2 or higher tumbling or flying skills will be considered on a case-by-case basis, based on team needs.

**Tryout Fee:**

Returning Athletes: FREE if turned in on or before October 30<sup>th</sup>

New Athletes: \$50 if turned in on or before October 30<sup>th</sup>

\$100 if turned in after October 31<sup>st</sup> for ANY Athlete

These dates are strictly enforced, no exceptions.

Tryouts	Saturday, November 14 <sup>th</sup>	10:00a-11:00a
---------	-------------------------------------	---------------

**Private Tryout Prices:**  
**\$75 if Paid in Full by October 30<sup>th</sup> or \$150 after October 30<sup>th</sup>**

**AFS**



## Elite All Star Team Information – After Football Season Program

Practices will begin the week of November 16<sup>th</sup>, 2026  
Exact practice days and times will be determined after Team Placement.

### Pricing

MONTH	FEE
May - July	50% discount on classes or PICK 3 with completed packet
August - November	\$120 per month includes: skills class of your choice and AFS Training
December*	\$305
January **	\$305
February***	\$305
March****	\$305
April	\$305
May	\$305

\*Tryout Fee – Amount based on date turned in

\*\*Competition Bow \$20, Workout Wear - \$100 & Choreography/Music Fee - \$100

\*\*\*Coaches Travel Fee & Travel Apparel Part 1 - \$125

\*\*\*\*Coaches Travel Fee & Travel Apparel Part 2 - \$125

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

**ALL payments must be made prior to signing up.**

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

Not included: \$100 Workout Wear, Bow \$20, Choreography/Music \$100, USASF Membership (approximately \$50), ASWC Membership Fee \$20-\$30 (if needed), Coaches Travel Fee & Travel Apparel \$250 and Registration Fee (if needed).

Athletes may add an additional tumbling or specialty skills class for a 10% discount.

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

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

### Additional Information

All teams will compete at a minimum of two out-of-town events and you will be responsible for travel, lodging, meals, etc.



**AFS**



**2026-2027 Important Dates**  
Please Check ALL CLOSING Dates Carefully

**Important Events and Closing Dates:**

November 14<sup>th</sup> - Tryouts  
**November 16<sup>th</sup> – TEAM PRACTICES BEGIN**  
November 21<sup>st</sup>- 29<sup>th</sup> – Closed for Thanksgiving Break  
**December 5<sup>th</sup> – MANDATORY CHOREOGRAPHY**  
December 19<sup>th</sup>- January 3<sup>rd</sup> – Closed for Winter Break  
**JANUARY 4<sup>TH</sup> – TEAM PRACTICES RESUME**  
January 18<sup>th</sup> – Closed for MLK  
February 15<sup>th</sup> – Closed for Presidents Day  
March 13<sup>th</sup>- 21<sup>st</sup> – Closed for Spring Break  
**MARCH 22<sup>nd</sup> – TEAM PRACTICES RESUME**  
March 26<sup>th</sup>-28<sup>th</sup> – Closed for Good Friday & Easter  
May TBD – Tryouts

**Competition Dates:**

February 13<sup>th</sup> - February 14<sup>th</sup> – MEGA Nationals, Allen, TX  
February 27<sup>th</sup> - February 28<sup>th</sup> – Gold Rush Super Nationals, Frisco, TX  
March 13<sup>th</sup> – NTGU Sock it to ‘Em – Denton, TX  
April 3<sup>rd</sup> - March Madness – Garland, TX  
April 14<sup>th</sup> – 18<sup>th</sup> – All Star World Championship – Orlando, FL



**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 6<sup>th</sup> 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.

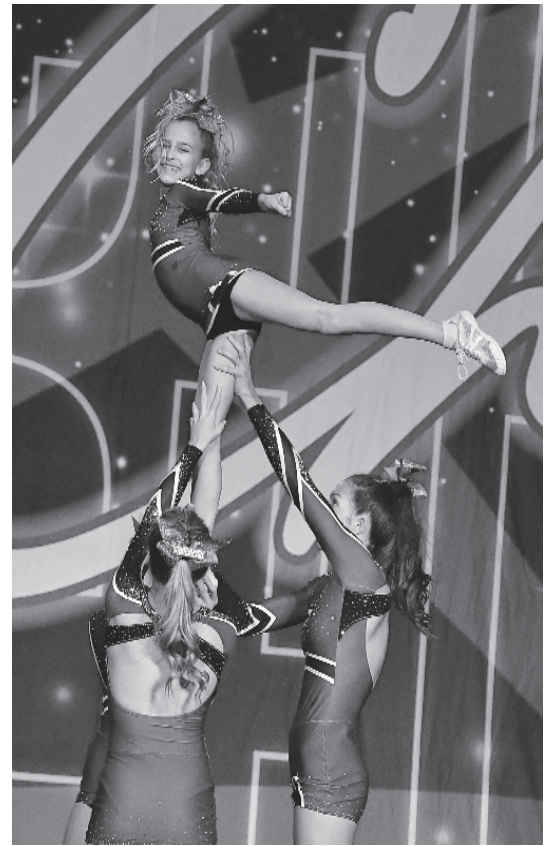
## Code of Conduct

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.



**AFS**



## Elite All Star AFS - Tryout Form

Athlete's Name: \_\_\_\_\_ Birth Year: \_\_\_\_\_

Athlete's Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

2026-2027 Grade: \_\_\_\_\_

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

Do you have any kind of Cheer Experience?      Yes      No

If yes, what kind? \_\_\_\_\_  
(Example: Sideline Cheer, Different Cheer Gym, Novice Team, Prep Team, etc.)

Do you cheer for your school?      Yes      No

If yes, which squad \_\_\_\_\_

Parent name (s): \_\_\_\_\_

Parent's Email: \_\_\_\_\_

### **Please Initial:**

\_\_\_\_\_ I am aware that the Express Elite All Star AFS Teams travel out of town and understand I will be responsible for all travel expenses.



## 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.**

\_\_\_\_\_ 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!

\_\_\_\_\_ You must advise your coach in advance if your child will be arriving late or leaving early from practices.

\_\_\_\_\_ If a student is injured or sick and not contagious, they are required to attend practice, not participate.

\_\_\_\_\_ 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.

\_\_\_\_\_ 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:

- ◆ Too much home work / studying (please plan ahead)
- ◆ Don't have a ride (again, please plan ahead)
- ◆ Work
- ◆ School Sports
- ◆ Cotillion

\_\_\_\_\_ 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.

\_\_\_\_\_ 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.

\_\_\_\_\_ 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.

\_\_\_\_\_ 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.

\_\_\_\_\_ 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.

I, \_\_\_\_\_ (parent), understand, accept, and agree to all of the terms and conditions within the Express Cheer Evaluation Packet.

Signature \_\_\_\_\_ Date \_\_\_\_\_

# Payment Contract Agreement

Student's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

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

\_\_\_\_\_  
(parent's initials)

I acknowledge that, under the terms of this Agreement, the above-named student will be charged a registration fee once a year and all tuition will be payable on the 20<sup>th</sup> of each month prior. If fees are not paid on time, I acknowledge that late fees will be charged.

\_\_\_\_\_  
(parent's initials)

Tuition does not change based on the number or length of practices in any month.

\_\_\_\_\_  
(parent's initials)

It is also acknowledged that FAILURE TO ATTEND PRACTICES WILL NOT RELIEVE ME OF ANY OBLIGATIONS TO PAY THE TUITON AGREED UPON, AND THAT NO REFUNDS OR MAKE-UP CLASSES FOR TUITON PAID SHALL BE MADE FOR NON-ATTENDANCE OR WITHDRAWAL. I further acknowledge that I will be required to pay for all uniform pieces, and trips and expenses not included in Express tuition.

\_\_\_\_\_  
(parent's initials)

I further acknowledge that under the payment plan, if I withdraw my athlete for any reason, I may be responsible for additional fees. **All resignations must be received in writing.**

\_\_\_\_\_  
(parent's initials)

I understand that if my athlete is no longer a part of an Express Cheer team for any reason, their uniform will need to be returned within one week of their resignation. If it is not returned, I will be charged the full price of the uniform.

\_\_\_\_\_  
(parent's initials)

In addition, I understand by signing this page, I give Express the right to run the credit card on file for any outstanding balance on the 1<sup>st</sup> of each month, or for the cancellation fee of \$750.

\_\_\_\_\_  
(parent's initials)

I understand that carrying a balance on my account will hinder my athlete from taking additional classes or private lessons until team tuition has been paid. In addition, if monthly tuition is not paid by the 1<sup>st</sup> of each month, my athlete will sit out of practice until the account is current.

\_\_\_\_\_  
(parent's initials)

I acknowledge the monthly tuition does not include any additional charges (late interest, penalties, unbilled attorneys' fees, etc.) upon signing this agreement I agree to pay additional charges or fees which are incurred if it becomes necessary to collect the amount referenced in agreement.

\_\_\_\_\_  
(parent's initials)

I understand that if any installment is late or missed, Express Cheer reserves the right to continue with the collections process and take whatever action is deemed necessary to recover the full amount of debt including but not limited to cancellation of this agreement and/or exclusion of your child from participation in all Express Cheer related activities.

\_\_\_\_\_  
(parent's initials)

I acknowledge that I must always have two forms of payment on file.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date



## 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<sup>th</sup> prior to each month.

A late fee of \$25 will be assessed for payments received after the 1<sup>st</sup> of each month unless prior arrangements have been made.

### Customer Information:

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

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

Credit Card Information \_\_\_\_\_ 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<sup>th</sup> of each month prior.

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

**All returned payments, declined credit cards, and/or expires cards will result in a \$35 non-sufficient funds fee.**



# ENROLLMENT APPLICATION

Check one:    New Student    Sibling    Returning Student

## PARENT/GUARDIAN INFORMATION (Person responsible for the account)

Mother/Guardian First Name	Mother/Guardian Last Name	Cell Phone Number	Allow Texting
Father/Guardian First Name	Father/Guardian Last Name	Cell Phone Number	Allow Texting
Mailing Address		City, State, Zip Code	
Parent Drivers License and Date of Birth		Email Address	

## STUDENT INFORMATION (One Form Per Student)

Student's First Name	Student's Last name	Birth date	Age
Gender	Medical Conditions, Disabilities, Allergies, Issues, and/or Concerns		

## CLASS REGISTRATION & FEES

Class #1		Start Date	
Class #2		Start Date	
Class #3		Start Date	
Class #4		Start Date	
Annual Enrollment Fee		1st Months Tuition	Regular Monthly Tuition

### RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AGREEMENT AND MEDIA RELEASE

In consideration of the above named students/participants participating in the programs of Express Cheer, a Spirit Athletics company, I represent that I understand the nature of the above enrolled activities and that I am or my children are qualified, in good health, and in proper physical condition to participate in such activities. I acknowledge that if I believe event conditions are unsafe, I or my children will immediately discontinue participation in the activities. I fully understand that these activities involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my or my children's own actions, or inactions, those of others participating in the activities, the conditions in which the activities take place, or the negligence of the "releasees" named below; and that there may be other risks either result or my or my children's participation in these activities.

I hereby release, discharge, and covenant not to sue Express Cheer, Spirit Athletics LLC, its respective owners, partners, administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I hereby approve, agree and release any photographs, video or audio recording ("MEDIA" herein) taken by employees or agents of Express Cheer that include a depiction of my child during activities held at Express Cheer or any public event that includes Express Cheer, for use in whole or in part, in marketing, social media and/or training material or any other form deemed acceptable by Express Cheer. I hereby release and discharge Express Cheer, Spirit Athletics LLC, from any and all claims, damages or relief due to the use of such media. I hereby grant, assign and transfer to Express Cheer all rights and interest therein at no charge.

I understand that tuition is due on the first class of the session and a late fee of \$20 will be access for any late payments. I acknowledge that an enrollment fee of \$45 per student (maximum of \$90 per family) is due on each anniversary date of enrollment. Class Make Ups must be arranged arranged by contacting the main office staff. Make Ups are not guaranteed and are available only if there are class openings. To qualify for make ups, students must be actively enrolled in classes and/or programs. Furthermore, I agree to contact the office staff in person and in writing to change or withdraw from class.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AGREEMENT AND MEDIA RELEASE, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

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

Parent/Guardian Signature

**OFFICE USE ONLY**   System Entry \_\_\_\_\_ Follow Up Email \_\_\_\_\_



CITY OF DALLAS

City of Dallas

Park and Recreation Department (DPR)

CREDIT CARD AUTO DEBIT AUTHORIZATION FORM

Name on Card: \_\_\_\_\_

Credit Card Number (First 4 and last 2 digits only) : \_\_\_\_\_-XXXX-XXXX-XX\_\_\_\_\_

Card Type:  Visa  MasterCard Expiration Date: Month/Year: \_\_\_\_/\_\_\_\_

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

Privacy and Security Statement: It is the policy of City of Dallas DPR to respect the privacy of its customers. As such, all information presented here will NOT be sold or distributed to any party. We maintain strict internal policies against unauthorized disclosure or use of customer information. Security protocols have been implemented to restrict access to information according to job responsibility.

Participant's Name(s):	Program Title (i.e. After School Program)	Recreation Center (i.e. Kidd Springs)
Participant 1. _____	_____	_____
Participant 2. _____	_____	_____
Participant 3. _____	_____	_____
Participant 4. _____	_____	_____

ACKNOWLEDGEMENT

Initials:

- [ ] I hereby authorize City of Dallas DPR to automatically debit my account weekly (every Friday) for After School Program/Summer Camp or monthly (on the 1st Monday) for any other program.
- [ ] I understand that the amount being debited will only cover the program fee due and will not cover any previous bill, late fees, membership fees, etc.
- [ ] I understand I am responsible for keeping Credit Card information updated (i.e. expiration dates, replacement cards, etc.).
- [ ] I understand that if my card is declined, there may be a \$5.00 late fee assessed, and the participant will not be eligible to attend the program until payment is made in full.
- [ ] I understand that if my card is declined two (2) consecutive times, I will be removed from the Auto Debit Payment Plan and will need to make full payment in advance to secure a spot in the program.
- [ ] I acknowledge that this auto pay authorization will be in effect until cancelled. To cancel future auto debits, I will notify appropriate Center Manager in writing fifteen (15) days in advance.
- [ ] I understand that there are no prorated options for this program, fees are charged in full whether participant is present or not.
- [ ] I understand that a valid email is required to be on file as this is how I will receive all communications about my Auto Debit Payment Plan, including receipts.

PRINT NAME

DATE

City of Dallas DPR Representative Signature

Authorization form reviewed by City of Dallas DPR

SIGNATURE

Representative (date) \_\_\_\_\_

# TEAM REPRESENTATIVE FORM

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

---

NAME OF ATHLETE

DOB

AGE

---

NAME OF PARENT OR LEGAL GUARDIAN

---

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

ATHLETE'S SWEATSHIRT SIZE

---

MEDICAL CONDITIONS, DISABILITIES, ALLERGIES AND/OR CONCERNS

---

EMERGENCY CONTACT NAME & PHONE

Express Cheer & Dance Competition Release Waiver:

I, \_\_\_\_\_ (parent), parent of \_\_\_\_\_ (athlete, an Express Cheer & Dance athlete, explicitly allow \_\_\_\_\_ (athlete) to check in and out of off competition day activities without my presence. I also understand that if my athlete does not follow the process below for said activities, I will be required to be present at each check in and check out.

- 1) Athlete will check in with Team rep at the location and time provided in competition letter.
- 2) Athlete will check out with Team rep at the location and time provided in communication from Team rep.

---

Parent Print & Signature

---

Date

---

Athlete Print & Signature

---

Date



# ABSENCE REQUEST FORM

NAME OF ATHLETE: \_\_\_\_\_ DATE: \_\_\_\_\_

TEAM: \_\_\_\_\_

REQUESTING TO BE ABSENT:

MONTH: \_\_\_\_\_ DAY: \_\_\_\_\_ TIME: \_\_\_\_\_

SCHOOL ACTIVITY: \_\_\_\_\_

VACATION/OTHER: \_\_\_\_\_

WILL YOU BE ABLE TO ATTEND ANY PORTION OF THE SCHEDULED PRACTICE?

YES - OR - NO

IS SO WHICH PART? \_\_\_\_\_

\_\_\_\_\_  
(athlete's initials) I KNOW THAT SCHOOL RELATED ACTIVITIES FOR A GRADE ARE THE ONLY EXCUSED ABSENCES.

\_\_\_\_\_  
(athlete's initials) I AM AWARE THAT MY ABSENCE CAN AND WILL AFFECT THE REST OF THE TEAM PRACTICE.

\_\_\_\_\_  
(athlete's initials) I KNOW THAT MY PARTICULAR STUNT OR STUNT GROUP WILL NOT BE ABLE TO PRACTICE AND ALL SPACING AND FORMATIONS WILL BE AFFECTED BY MY ABSENCE.

\_\_\_\_\_  
(athlete's initials) I PROMISE TO LEARN ANY NEW OR CHANGED MATERIAL PRIOR TO MY NEXT PRACTICE.

\_\_\_\_\_  
(athlete's initials) I UNDERSTAND UNAPPROVED ABSENCES MAY JEOPARDIZE AN ATHLETE'S POSITION AS A PERMANENT MEMBER OF A TEAM.

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

\_\_\_\_\_  
PARENT'S NAME

\_\_\_\_\_  
ATHLETE'S SIGNATURE

\_\_\_\_\_  
PARENT'S SIGNATURE