



Omni Elite 2020-2021 Forms Checklist

Athlete Name: _____ Team _____

I am a (please circle one): RETURNING ATHLETE NEW ATHLETE

Parent's Name: _____

Address _____

Phone Numbers _____ Email _____

Birthday _____ Age _____

School _____ Grade _____

____ Cheerleader contract

____ Parent Contract

____ Online Registration Complete

____ Payment Agreement Signed

____ Birth Certificate COPY (if we do not have it on file)

____ Parent/ Cheerleader Handbook Signature Page

____ Physical

____ USASF Registration/Renewal go to http://usasf.net/members/athletes/signup_renew/

(deadline to register for USASF is July 30th)

*** Please include this form in your try-out packet. Should be turned in on or before your evaluation day.



OMNI ELITE CHEERLEADER CONTRACT

Please initial next to each item.

- _____ 1. I understand that cheerleading is a team sport and I understand that 100% participation is vital for each team to fully function. I agree to be at every practice, on time, except for **extreme and extenuating** circumstances. I will avoid **any elective activity** that will conflict with cheer duties. I know that school or work is not a valid excuse for missing any practices. I know that school, work and vacation should be scheduled around summer and regular school year cheer responsibilities.
- _____ 2. I understand that my attendance is extremely important to the success of my time. I am aware that I will have a meeting with the coaches about either being removed or a consequence if I miss practice. **I understand that being more than 15 mins late or no-show without a reasonable excuse will be considered a missed practice and that unexcused practices can lead to suspension or dismissal from the team/program. I know that I must call or notify 1 hour prior to practice if I am planning on being absent. If I am sick I know that I have to provide a doctor's note to be absent or I promise to still attend practice, even if I have to sit out. On the 4th unexcused absence, the athlete will be dismissed from the team.**
- _____ 3. I understand that practices are just as important during the summer as they are during the school year. I will take summer practices seriously so that teams are prepared for choreography in July/August.
- _____ 4. I understand that cheerleading is a very complex sport and I will push myself and give 110% at every practice.
- _____ 5. If I need extra help I agree to let my coaches know. I know that plenty of extra classes and private lessons are available to help me achieve higher skills.
- _____ 6. I will do everything I can to keep Omni Elite a clean facility. I will ensure that I pick up all personal trash and put away my belongings upon entering Omni Elite.
- _____ 7. I will respect and support all coaches decisions. I trust that my coach will make decisions based on the best interest of the entire team, rather than focusing on the advancement of one individual. I understand that I may be asked to leave the gym if I give any adult (coach, staff or parent) an attitude when asked to do something.
- _____ 8. I will respect each and every teammate and I will never use offensive language, derogatory terms and talk down to another teammate. I will conduct myself as a cheer professional at all times while present at Omni Elite. This includes on Social Media.
- _____ 9. I understand the "NO DRAMA" rule at OE. I vow to conduct myself in a positive manner while on the blue mats. I will not talk negatively about coaching decisions or another cheerleader on the team.
- _____ 10. I understand that Omni Elite offers an open-door communication policy. I will go directly to my coaches with any complaints.
- _____ 11. I promise to be a responsible cheerleader and communicate any team information, including issues, to my parents honestly and in a timely manner

Cheerleader's Name

Signature

Date



OMNI ELITE PARENT CONTRACT

Please initial next to each item.

_____ I have read the OE Policies, Rules and Regulations in the team packet and my cheerleader's contract and I understand and agree with its contents. I understand the responsibility my child is undertaking by becoming a OE member. I agree to fully support my child and will encourage them to fulfill their commitment. I understand being a OE member is a commitment on the part of the parent as well.

_____ I understand that cheerleading is a team sport and I understand that 100% participation is vital for each team to fully function. I agree to get my child to every practice, on time, except for **extreme and extenuating** circumstances. Any elective activity that will conflict with cheer duties must be avoided. School or Work is not a valid excuse for missing any practices or activity. School or work should be scheduled around summer and regular school year cheer responsibilities. Doctor appointments are to be made outside of your child's practice schedule.

_____ I realize that when representing OE I must always conduct myself with class and respect. I understand that any athlete or parent that does not abide by the rules and regulations contained in this contract, is consistently negative, or acts in a manner that jeopardizes the name and reputation of OE, will be subject to removal with no refund.

_____ I understand that practices may be closed from time to time, and I will respect this decision.

_____ I understand my athlete may be removed from the program or suffer appropriate consequences for missing practices, **without refund**. To be a no-show without a reasonable excuse will be considered a missed practice. I understand that I must provide a doctor's note if my child will not be at practice because of illness. Being sick or having a fever is not enough and will still result in an unexcused absence.

_____ **I understand that practices are just as important during the summer as they are during the school year. I will ensure that my cheerleader takes summer practices seriously so that teams are prepared for choreography in July/August.**

_____ I understand the financial commitment I am making in registering my child to be on a OE All-Star team. I understand that there are no refunds on any Omni Elite team fees, for any reason. I am aware that, should my child become injured, we may have to replace them with another athlete and OE will still be responsible for competition fees. I understand that competition fees are paid a in advance, so no fees will be refunded.

_____ I understand that if my cheerleader decides to leave OE before the season is over, or if my cheerleader is dismissed from the program for any reason, a Stop Payment Waiver **must** be signed in order to stop future monthly payment charges. I know that all outstanding balances must be paid on my account.

_____ I will do everything I can to keep Omni Elite a clean facility. I will ensure that my child picks up all personal trash and puts away their belongings upon entering Omni Elite. I will not eat or allow my children to eat in the Gym or Parent Viewing Areas.

_____ I will respect and support all coaches' decisions. I trust that my child's coach will make decisions based on the best interest of the entire team, rather than focusing on the advancement of one individual.

_____ I understand that being an **active** member of the Omni Elite Foundation is a requirement.

_____ **I understand the "NO DRAMA" rule at OE. I vow to conduct myself in an positive manner while in the Omni Elite parent viewing area. I will not talk negatively about coaching decisions or another child on the team. While not everyone shares the same views, this can easily be offensive to others. If you have a concern please take it to the coaches (after practice) or the director.**

_____ I understand that Omni Elite offers an open-door communication policy. I will go directly to coaches and/or staff with any concerns. **I will also not confront a coach on the floor during practice.** This is distracting to the entire team.

Child's Name: _____ Parent's Name _____

Parent Signature

Date

Omni Elite Allstars

AUTOMATIC CREDIT/DEBIT CARD PAYMENT AGREEMENT

Cheerleader Name: _____ Class/Team: _____
Primary Caregiver: _____ Phone: _____
Name on Card _____ Email: _____
Credit/Debit Card #: _____ Expiration Date: _____
Code on Back: _____ Card Type: _____ Zip Code _____

1. We will gladly accept cash or check payments. However, you **MUST** have this form completed and on file as a back-up before your athlete will be allowed to participate in any activities. **NO EXCEPTIONS!**
2. If you choose to pay with cash or check, your account balance must be at \$0 on the 1st of each month or your card will be charged.
3. OE will provide an account statement **upon request**. It is **YOUR** responsibility to make sure funds are available to be taken out on the **1st** of every month. The charge will appear as "Omni Elite" on your credit/debit card statement.
4. Any payment attempts resulting in a NSF (Non-sufficient funds), **declined credit cards, expired credit cards, returned checks, etc. will incur a \$25.00 service charge**. If your payment is declined you will be notified and must make a **payment by the 5th to avoid a \$25.00 late charge to be applied to your account**.
5. OE reserves the right to remove a cheerleader from their team at any time for failure to keep up with financial obligations. A cheerleader's account must be current to participate in practice/ competitions/ camps.
6. If a cheerleader chooses to leave or if asked to leave OE for any reason before the season is over, any and all funds are completely **non-refundable and a Stop Payment Waiver must be signed & paid to stop future tuition payments**.
7. This agreement will remain in effect until canceled by either party.
8. OE reserves the right to turn over all delinquent accounts to a collections agency and the parent/cheerleader will be responsible for all additional costs incurred.

This agreement is legally binding and authorizes Omni Elite to automatically deduct the tuition/cheer fees balance of my account from the credit card listed above. I declare the account number given belongs to me, and that any changes to or cancellation of the automatic payment plan will be made strictly by me.

Customer Authorization Signature: _____

Date: _____ Office Staff Initials: _____

NOTES:

