

SONIC ELITE OLYMPIA

SEASON 9

ALL-STAR CHEER FUNDAMENTALS

HANDBOOK

Champions are not born, they are built here...everyday!

Welcome to Sonic Elite Olympia (SEO)! We are excited about your choice to further your cheerleading and tumbling training with us. Our talented and knowledgeable coaching staff has over 30 years of cheer experience and will do everything in their power to help each athlete refine and progress in their skills.

This handbook has been created for you to understand how our gym works, as well as provides you with all forms required for an athlete to be able to train with SEO.

We hope you are pleased with the training we provide and thank you for selecting SEO to work with your athlete.

Julia Skidmore
SEO Owner and Director

SEO ASCF Handbook Table of Contents

SECTIONS:

- 1- Basic Information (Pg. 3)
- 2 - Communication (Pg. 3)
- 3 - Session Dates (Pg. 4)
- 4 - Cost and Payment Information (Pg. 4)

ATTACHMENTS:

- Treatment/Liability/Publicity Release (Pg. 5)
- Health and Contact Information (Pg. 6)
- Credit Card/Account Information Form (Pg. 7)

Section 1 – Basic Information

Practices are typically Fridays from 7-8pm. There may be a time where we have to adjust the class days or times, but that is not common and you will be given advanced notice.

Athletes should wear their SEO T-shirt and black shorts to each session. They are required to wear shoes at every practice. If your athlete comes without shoes, they will not be able to participate that day.

New sessions start every four months and we try to make sure you have that information well in advance so you can see if you would like to enroll your athlete.

Attendance is very important because we are trying to build a routine for our athletes to perform at the end of the session in a showcase. If your athlete will miss more than three practices, they will not be allowed to participate in the showcase.

Section 2 - Communication

Our coaching staff is happy to talk with you or your athlete about any concerns that you have. Please understand that due to having so many athletes, teams, and classes here at SEO, staff members are often very busy and may not have time to chat in-between practices. We do ask that for topics pertaining to joining SEO, practices, clinics, classes, competitions, events, apparel orders, teams, athlete accounts, invoices, payments, or anything related to finances, please email us at: soniceliteolympia@gmail.com

In the event you would like to have a face-to-face meeting with an SEO staff member before or after a practice, you must make a request via the email above and confirm an appointment at least 24 hours in advance. We ask that this is done so we can plan enough time to adequately address any concerns you have and ensure that your needs are met.

Unless it is an emergency, please refrain from texting, Facebook messaging, or instant messaging our staff. If it is an emergency, please use any means necessary to contact the staff member you need directly.

Section 3 - Session Dates

Spring/Summer Session:

May 17th-August 23rd

Showcase: August 23rd

Fall/Winter Session:

September 6th- December 20th

Showcase: December 20th

(November 28th-December 1st the gym is closed for Thanksgiving break.)

Winter/Spring Session:

January 10th- April 25th

Showcase: April 26th

(April 10th-15th the gym is closed for Spring break.)

Section 4 - Cost and Payment Information

The cost for ASCF is \$75 per month. The cost covers coaching, a T-Shirt, and a bow.

Payments will be automatically deducted from your payment account on the first of each month.

TREATMENT/LIABILITY/PUBLICITY RELEASE WAIVER

(Return to SEO before attending for the first time)

Please read and initial the following:

_____ I authorize medical professionals to administer any necessary emergency treatment for any injury or serious illness if neither parent can be reached. I will assume all financial responsibility for any medical treatment.

_____ I understand any equipment used at tumbling classes, clinic, or open gyms has associated risks and that injuries are a possibility.

_____ I further acknowledge that the athlete below has elected to participate in Sonic Elite Olympia programs at their own risk, and will not hold the Sonic Elite Olympia owners, and/or instructors liable for any and all injuries that may occur while participating in any activity or event that Sonic Elite Olympia may hold.

_____ I hereby grant Sonic Elite Olympia and its successors, the unrestricted right to use my child's name, likeness, or appearance on any program literature, calendars, photographs, flyers, video material, film material, computer software, computer hardware, electronic on-line services, or other similar promotional material in any form, content or medium to promote or market Sonic Elite Olympia.

Athlete Name: _____

Parent Name: _____

Parent Signature: _____

Date: _____

HEALTH AND CONTACT INFORMATION

(Return to SEO before attending for the first time)

Athlete Name: _____

Date of Birth: _____ Age: _____

Current Grade: _____

School: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mothers Name _____ Cell: _____

Email: _____

Fathers Name _____ Cell: _____

Email: _____

Does your athlete have any allergies?

If yes, please specify: _____

Does your athlete have asthma? YES _____ NO _____

(If yes, please make sure athletes have any necessary medication with them at all SEO events.)

Does your athlete have any history of heart problems, seizures, or severe medical problems?

If yes, please specify: _____

Has your athlete had any broken bones, sprains, tears, or concussions?

YES _____ NO _____ If yes, please specify: _____

Athletes Physician: _____ Phone: _____

Medical Insurance Provider _____ Policy #: _____

Emergency contact other than parents:

Name: _____ Phone: _____

Relationship to Athlete: _____

CREDIT CARD OR BANK ACCOUNT INFORMATION

By signing below and providing my credit card or bank account information, I authorize Sonic Elite Olympia to automatically charge me on the 1st of each month that my athlete attends All-Star Cheer Fundamentals.

Athlete Name: _____

Parent Name: _____

Parent Signature: _____

Date: _____

The following banking and or credit card information will be removed and permanently destroyed immediately after being entered into the SEO accounting program.

Bank Name: _____

Bank Account Number: _____

Bank Routing Number: _____

OR

Name on Card: _____ Billing Zip Code: _____

Credit Card Number: _____ Expiration Date: _____