



**Tumbling, Rec Cheer,
Clinics, and Open Gym
Handbook
2020-2021**

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 20 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 Brusselback
SEO Owner and Director

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.

Costs and Payment Information

There are a few options to choose from for making payments. Please read the following and choose your preferred method.

Weekly Tumbling, Stretch, and Rec. Classes:

- \$50 per month for a one-hour class per week.
- Provide bank account or credit/debit card information (3% fee applies), using the attached form. This information will be kept on file and will be automatically billed at the time of service.
- If athletes wish to drop any of these classes, a two weeks notice must be provided or accounts will be charged for the classes missed.

Open Gym:

- Pay \$5 per visit with a check or cash at the time of service.

Clinics:

- Pay with a check or cash at the time of service. Prices vary per clinic.
- Provide bank account or credit/debit card information (3% fee applies), using the attached form. This information will be kept on file and will be automatically billed at the time of service.

***Please Note: Athletes must submit payment and this completed handbook to SEO before attending their first class, clinic, or open gym. Athletes will not be able to participate otherwise.**

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: _____

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 at the time of service each time my athlete attends a tumbling class, clinic, or open gym.

Athlete Name: _____

Parent Name: _____

Parent Signature: _____

Date: _____

(The following banking and/or credit card information will be entered into the SEO accounting program and this form will be shredded to protect our patrons.)

Bank Name: _____

Bank Account Number: _____

Bank Routing Number: _____

OR

Name on Card: _____ Billing Zip Code: _____

Credit Card Number: _____ Expiration Date: _____