

2023-2024 APAC Competitive All Star Cheer Contract

Athlete's Name: _____

Team members must provide all social media handles.

Facebook: _____ Snapchat: _____

Instagram: _____ Twitter: _____

TikTok: _____ BeReal: _____

Rules & Regulations 2023-2024

This copy must be notarized and brought prior to the end of evaluations. By signing this contract, you are also stating you have read all APAC studio and team information. You agree to abide by all policies of Amarillo Performing Arts Center.

If a contract is not signed & notarized, your child will not be placed on a team.

INITIAL EACH STATEMENT

1.) Being on a competition team is a full year commitment. Quitting or being removed from your team for any reason will require full payment of remaining tuition, fees, and applicable Quitter's Fee. Season will be June-April. If your child becomes injured during your 11-month contract, you will forfeit all funds that have been paid already to APAC. Athletes/Guardians are responsible for all fees, tuition, uniform costs, and any other financial obligations through the end of the season.

Parent Initials: _____ Team Member Initials: _____

2.) Leaving the team for any reason will result in the applicable Quitter's Fee.

Parent Initials: _____ Team Member Initials: _____

3.) Team members and family members are expected to maintain a positive attitude towards our training program and studio throughout the year. This includes the faculty, students, and other family members. Failure to do so gives us the power to remove an athlete from their team if we feel that is best for the team. If this occurs, all tuition, fees, and Quitter's Fee will still be due through the end of the season.

Parent Initials: _____ Team Member Initials: _____

4.) Only 4 absent days are allowed per semester. (3 late marks on attendance will equal 1 day.) The 2 weeks prior to all competitions are mandatory.

Parent Initials: _____ Team Member Initials: _____

5.) Team members are required to be at all required performances and competitions.

Parent Initials: _____ Team Member Initials: _____

6.) Team members must arrive ready to compete two hours (or at doors open) prior to their first scheduled competition time. Athletes must arrive in full hair and make- up along with the correct uniform. Athletes must also be in full hair, make-up, and uniform when receiving awards throughout the season.

Parent Initials: _____ Team Member Initials: _____

7.) Team members are responsible for their own uniforms. You must ensure you have every piece of your uniform before leaving for competition. Extra jewelry, fake nails, and nail polish are not to be worn at competition.

Parent Initials: _____ Team Member Initials: _____

8.) If a team member falls behind, they may be required to book private lessons in order to catch up.

Parent Initials: _____ Team Member Initials: _____

9.) Parents and team members are responsible for checking the app, reading emails, and checking the website for pertinent information.

Parent Initials: _____ Team Member Initials: _____

10.) Correct attire is required for all classes and rehearsals. Some rehearsals will require team wear to be worn.

Parent Initials: _____ Team Member Initials: _____

11.) All social media posts that include the likeness of any team member must be appropriate by the Director's standards.

Parent Initials: _____ Team Member Initials: _____

12.) All choreography is viewed as the choreographer's intellectual property and should be credited as such. All routines are property of APAC and may only be presented in approved performances and internet posts. This material is never to be taught, used, posted, or shared throughout the season without permission from APAC staff.

Parent Initials: _____ Team Member Initials: _____

13.) Athletes taking private lessons are required to book through the APAC website. Cancellation or rescheduling must take place at least 24 hours in advance. No refunds or reschedules will be given after the 24 hour window.

Parent Initials: _____ Team Member Initials: _____

14.) All communication will be received by email to info@amarillopac.com. Quick information may be sent via text to the studio. Do not text or social media message an instructor as a form of communication.

Parent Initials: _____ Team Member Initials: _____

15.) Financial responsibility is required of all responsible parties. Failure to maintain a current account is unfair to the studio and other team members and may result in removal from the team.

Parent Initials: _____

16.) Late Fees: A \$15 late fee will be charged 3 times per month to ANY outstanding balance on the 5th, 15th, and 25th. This can total \$45.00 in late fees per month.

Parent Initials: _____

17.) I understand there will be additional financial obligations and optional fees that are not outlined in this contract that may arise. (Examples: recital pictures, additional competition fees, optional recital costumes, etc.)

Parent Initials: _____

18.) I understand that it is my choice to be a part of this team. The studio/team rules and director's decisions are of the utmost importance to provide the most successful year. All director decisions are final.

Parent Initials: _____ Team Member Initials: _____

2022-2023 APAC Competition Team Contract

I, _____ (team member) understand that team is a commitment to others. I will work hard and be an asset to my team. I will practice while I am at home, listen in class, be respectful of my teachers, my fellow dancers, and others. I will represent APAC to the best of my ability.

Team Member Signature

I, _____ (parent/guardian) understand and will full comply with all the competition guidelines and all rules, regulations, and policies of the studio. **I fully understand the time and financial commitment of all competition teams as stated in the 2023-2024 competition guidelines.** I, on behalf of my child and myself, understand that risk of injury is inherent in any physical activity; I knowingly and voluntarily accept that risk. I, the undersigned, do hereby authorize Schae Burley or her designated agents (being teachers or administrators of SB Dance Academy and Amarillo Performing Arts Center) to obtain medical treatment for my child in emergency situations where I cannot be reached in time to authorize the treating physician to provide such emergency medical services. I understand that I am responsible for any medical expenses and that the absence of health insurance does not make SB Dance Academy or Amarillo Performing Arts Center responsible for payment of medical expenses. This authority includes the power to authorize any and all treatment deemed necessary under the circumstances by a licensed physician.

Parents, legal guardians of minor students, and students waive the right of any legal action for any injury sustained on studio property conducted by the student before, during, or after class. SB DANCE ACADEMY AND AMARILLO PERFORMING ARTS CENTER ARE NOT RESPONSIBLE FOR INJURY, LOSS, OR THEFT.

I AGREE TO ABIDE BY ALL RULES, REGULATIONS, AND POLICIES OF THE STUDIO.

Athlete's Name (print): _____ Date: _____

Parent Signature: _____ Date: _____

Athlete's Signature: _____ Date: _____

Notary Signature: _____ Date: _____