

2020-2021 CHEER ENTRY FORM

Powerhouse Cheer

NAME _____ AGE _____ DATE OF BIRTH _____

PARENT'S NAME _____ (HOME) TELEPHONE _____ (WORK) (CELL) _____ YES _____ NO _____
TEXT _____

MAILING ADDRESS _____ CITY _____ ZIP _____

YEARS OF CHEER _____ GRADE ENTERING _____ SCHOOL _____

TIME OUT OF SCHOOL _____ EMAIL ADDRESS _____

First Month Fee (Due with form) \$10.00 Registration Fee (due with form)

Classes start the week of August 31

Class run August through April Payable to: Brookhaven Recreation Dept.

_____ 5:00-6:00 Monday Advance Tumble Cheer (series of tucks, layouts full) \$60.00

_____ 3:45-4:30 Tuesday Fundamentals of Cheer age 4 & 5 \$50.00

_____ 4:30-5:15 Tuesday Beginner Class (cartwheel, roundoff, backbend, kickovers)
Age 6-up \$50.00

_____ 5:15-6:15 Tuesday (must have beginner skills listed above) \$60.00

_____ 6:00-7:00 Monday and 3:30-5:30 Wednesday Competitive Cheer/Acro
\$85.00

OVER

RELEASE, PHOTO AGREEMENT, PAYMENT AGREEMENT BY PARENT OR GUARDIAN

I _____, AM THE NATURAL PARENT AND/OR
PARENT
GUARDIAN OF THE MINOR CHILD _____ WHOSE

BIRTHDAY IS child _____.

BIRTHDAY

BY VIRTUE OF AND IN CONSIDERATION OF THE CITY OF BROOKHAVEN AND ITS
DEPARTMENT OF RECREATION ALLOWING MY MINOR CHILD TO PARTICIPATE IN THE
FOLLOWING RECREATIONAL ACTIVITY, TO-WIT:

CHEER

I DO HEREBY, ON BEHALF ON MY MINOR CHILD, RELEASE SAID CITY AND
DEPARTMENT FROM ANY RESPONSIBILITY FOR ANY HARM OR INJURY, (OR ANY LIABILITY
WHICH MAY RESULT THEREFROM) WHICH SAID CHILD MAY EXPERIENCE OR SUFFER FROM
WHILE PARTICIPATING IN OR ATTENDING A RECREATIONAL ACTIVITY SPONSORED,
OPERATED OR CREATED BY SAID CITY AND DEPARTMENT.

I FURTHER RECOGNIZE AND ACKNOWLEDGE THAT THE SAID CITY AND DEPARTMENT WILL
PROVIDE NO HEALTH AND ACCIDENT INSURANCE FOR MY CHILD TO COVER MY CHILD FROM
BODILY INJURY HE/SHE MAY SUFFER WHILE PARTICIPATING IN THE CITY AND DEPARTMENT
RECREATIONAL ACTIVITIES. I HAVE READ AND UNDERSTOOD THE ABOVE RELEASE AND
AGREE TO ITS TERMS. THE RECREATION DEPT OR CLASS INSTRUCTOR. HAS PERMISSION TO
USE ANY PHOTOGRAPHY TAKEN DURING THE CLASSES FOR PUBLICITY PURPOSES. I AGREE
TO PAY MONTHLY TUITION UNTIL I HAVE NOTIFY THE RECREATION DEPT. IN WRITING. I
HAVE READ AND AGREE TO THE BROOKHAVEN RECREATION DEPARTMENT POLICY THAT IS
ATTACHED.

SIGNED _____ DATE _____