



Aftershock

Quarter Season ICE Barrington

www.icecheer.com

ICE® ALL STARS 2017-2018

28039 W Northpointe Pkwy, Lake Barrington, IL 60010

ICE® teams consistently finish at the top in local and national competitions and our Level 5 Worlds teams place in the illustrious Top Ten at the USASF Cheerleading World Championships year after year. ICE® has made appearances on/in Cheerleader Magazine, ESPN, Good Morning America, Fox Sports, The Cheer Leader Magazine, and numerous local newspapers, radio, and television stations. We believe that every Cheerleader can be Successful, not just a few. We offer the highest quality and most experienced cheerleading professionals in the Midwest, quality you will find NOWHERE ELSE.

At ICE®, we firmly believe in the phrase: “I Can Excel!”

IMPORTANT DATES

Team Evaluations	Sunday, February 4th: 2pm - 5pm
First Practice	Sunday, February 4th: 6- 8 pm
Parent Meeting	Sunday, February 4th: 5 - 6 pm
First Tuition Payment Due	Sunday, February 4th – before trying out

CHECKLIST FOR TRYOUTS

We look forward to working with you. Be sure to arrive with these forms filled out and payments ready.

- Financial Commitment Form
- Member Form and Waiver
- Copy of Birth Certificate
- \$30.00 evaluation fee
- Uniform payment (see payment schedule page for exact cost)
- Created an account online in our system at www.icecheer.com prior to attending try outs
- Create a USASF Account and pay the \$30 membership fee – we will help you do this the night of evaluations, but please bring a credit card to pay

All paperwork is due at the time of tryouts

Athletes must have a good standing account with us, paperwork, and the deposit in order to try out.

COMMITMENT

Aftershock teams will practice 3 times a week, for two hours each practice. One of these practices will be during the week and two will be on the weekends. They will attend 3 LOCAL competitions with the hopes of obtaining bids to the USASF Cheer and Dance Worlds (Level 5 teams only) and The Summit (Levels 1-5 Rest.)

COMPETITION DATES

<u>Dates</u>	<u>Competition</u>	<u>Location</u>	<u>Bids Given</u>
March 10 th - 11 th	GLCC	Schaumburg, IL	Worlds, Summit
March 17 th – 18 th	CSG Super Nationals	Rosemont, IL	Worlds, Summit
April 14 th	Tournament of Champions	DeKalb, IL	Summit
April 26 th -30 th	Cheer and Dance Worlds	Orlando, FL	N/A
May 3 rd -7 th	The Summit	Orlando, FL	N/A

PROGRAM COSTS/TUITION

Tuition is paid monthly per athlete. This includes all practices (regularly scheduled and added), competition registration, coaches' fees, choreography, music, uniform, and a program bow. Tuition is due the **FIRST** of the month. A \$15 late fee will be added to all accounts paid after the **FIFTH** of the month. After you have created an account online, this is the system we will use to track your account and add monthly charges. Please be sure to log in and track your account as well.

PAYMENT SCHEDULE

Payment	Amount Due/ FEMALES	Amount Due/ MALES	Due Date	Late Fee Added
Due at Evaluations	\$30	\$30	Due online	
Due night of 1st practice- Uniform Payment	\$250	\$200	February 4th	Uniform will not be ordered until paid in full
February Tuition Payment	\$304	\$185	February 15th	\$15 after the 15th
March Tuition Payment	\$304	\$185	March 1st	\$15 after the 5th
April Tuition Payment	\$304	\$185	April 1st	\$15 after the 5th
World's Fee/Summit Fee*	\$50 (Paid bid) OR \$100 (At Large/Wildcard)	\$50 (Paid bid) OR \$100 (AT Large/Wildcard)	April 15th	Charged if Athletes earn a bid and attend

DISCOUNTS AND SAVINGS

- Sibling discounts are available if also enrolled in the same program. There is a 25% discount/sibling.
- Males are NOT eligible for a sibling discount

OTHER EXPENSES

- Additional ICE®/Team Apparel (optional)
- Travel expenses are the responsibility of each family and vary depending on competitions during a season.
- USASF Registration Fee – mandatory for participation, paid directly to USASF \$30.00

Copyright Notice: You cannot sell or create your own ICE clothing. This includes team name and any other likeness to logo, affiliation and/or program. Parents/Athletes/Staff wishing to enter a contest, while wearing the ICE Uniform, or representing ICE in any media, must first receive permission from the owner

PARENT POLICIES COMMUNICATION

As a parent, you will receive information in several ways such as, emails from your coach or Team Rep. You can also check www.ice-gym.com for new updates.

Fees

- A schedule of payments is listed in this handbook. All monthly fees are due the 1st of the month.
- Please make all checks payable to ICE®.
- A late fee of \$15 will be assessed for all payments made after the 5th. All other fees are due on the exact due date. You may pay by cash, check, credit card (Mastercard, Visa, Discover) or money order. Parents and responsible adults will be asked to sign a financial contract. Each person signing the contract will be responsible for keeping his/her child's account current.
- Monthly Tuition cannot be pro-rated for any reason and is nonrefundable.
- By the 15th of each month, your account must be up to date. Otherwise, athlete will be moved to an alternate position or asked to sit out during practice.
- Accounts are kept up on iClassPro and it is the responsibility of the parent to check the account and keep them current.
- A fee of \$25 will be added to all returned checks. Writing more than 1 bad check will result in using another payment method for the remainder of the time in the program.

Practices

There is a viewing area designated for all parents/friends. Parents/friends are asked to stay in that designated area and not come into training area. Coaches may close practices at any time for any reason.

Transportation

All transportation/accommodations to local competitions are solely the responsibility of each family. We will make every effort to provide information in a timely manner. However, if a competition is cancelled or rescheduled, ICE® All Stars will not be responsible for reimbursement for any reason.

Vacations

Vacations are not permitted during competition season, unless the gym is closed and the athlete has already cleared it with their coaches. Please see your coaches with any vacations at any time. Also, any summer vacations must be in writing 2 weeks prior to the missed practice(s).

Injuries

If an injury should occur, it is the responsibility of the parent to seek professional help. Each athlete must have his/her own medical insurance. After seeing a physician, please provide ICE® All Stars with an evaluation of the athlete's injury/status. A release from a doctor is required if a serious injury should occur.

Uniforms & Attire

Please keep all ICE® All Star Clothing, Warm-Ups, and Uniforms in good condition. Please report any lost/damaged uniform items to your coach. The cost of replacement will be the responsibility of the cheerleader. Please wear ASSIGNED gear to practice. (No jeans or jean shorts...) NO jewelry to practice. ICE® All Stars assumes NO responsibility of lost jewelry or any valuables.



AFTERSHOCK FINANCIAL AGREEMENT

I, _____ parent of _____
(Print name of parent/legal guardian) (Print name of team member)

Please read and initial next to each of the terms followed by your signature and date

____ I understand and agree that monthly tuition payments are due on the 1st of the month.

____ I understand that there is no refunds or prorating due to missed team practices through the season.

____ Additional practices may be added prior to large competitions. I understand there is no additional charge for additional practices.

____ Practices may be canceled due to holidays, competitions, or inclement weather and no refunds will be given.

____ I understand I am required to put a Debit/CC on file for tuition charges. If you would prefer to not include that informant on this form, you can access your online account and save that information under the “manage my payment options” section.

____ I understand that I am subject to a late fee charge of \$15.00 after the 5th of the designated month. Excessive tardiness in payments will be grounds for my child not competing, possible dismissal and my account being sent to a professional collections agency.

____ In the event that an athlete must resign from a team, by signing this contract; I am solely responsible for tuition fees and that **all fees are non-refundable and non-transferable**. I understand billing will not stop until written notice is received and that I am responsible for all fees until notice is given. If notice is not received prior to the 1st of the month, that month’s tuition will be due in full prior to leaving the program.

____ ICE reserves the right to remove athletes from the program if their financial obligation is not upheld. Athletes with past due balances that exceed 30 days may not participate in private lessons, classes, and/or team practices until the account is brought current. Past due balances that exceed 120 days will be sent to a third party collection agency for which additional charges will apply, and the parent will be solely responsible for the total amount.

____ I understand that all travel fees are non-refundable and do not hold ICE responsible for any changes/additions to travel plans. ICE will provide travel days when releasing the competition schedule to help make travel expectations understood.

____ I understand my uniform WILL NOT be ordered until it has been paid in full. I also understand that my uniform is custom made and therefore cannot be canceled once ordered through the 3rd party vendor. I understand that if my athlete chooses to quit after my uniform has been ordered, ICE will contact me to pick up the uniform once it is in, but that ICE is not responsible for selling my uniform.

I understand and agree to the above financial policy.

Parent/Guardian Signature: _____ Date: _____



AFTERSHOCK FINANCIAL FORM

Athlete Name: _____

Card Holder Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I understand that I am liable for and hereby authorize ICE to withdraw funds from my account for the purpose of any outstanding fees related to my account and that all fees are non-refundable. Failure to keep your account in good standing may result in your athlete being unable to participate, dismissal from ICE, and being sent to a col- lections agency.

VISA DISCOVER MASTERCARD ACCOUNT NUMBER

NAME ON CREDIT CARD EXPIRATION DATE CCV CODE

BILLING ADDRESS CITY, STATE AND ZIP

SIGNATURE of Card holder: _____



AFTERSHOCK APPEARANCE AGREEMENT

I hereby authorize ICE to publish photographs taken of my minor child or children listed below for use in ICE's print, online and video-based marketing materials, as well as other ICE publications. I hereby release and hold harmless ICE from any reasonable expectation of privacy or confidentiality for myself or the minor child/children listed below associated with the images specified above. Further, I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize ICE to use their likenesses.

I further acknowledge that participation is voluntary and that neither I, the minor child, nor minor children will receive financial compensation of any type associated with the taking or publication of these photographs or participation in company marketing materials or other ICE publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release ICE, its contractors, its employees and any third parties involved in the creation or publication of ICE's publications, from liability for any claims by me or any third party in connection with my participation or the participation of the minor children listed below.

Parent Signature: _____

Parent Name (printed): _____ Date: _____

Policies and Expectations Commitment

I have read and fully understand all codes, rules and expectations in this tryout packet. I understand that I am entering into this All-star program of my own free will. I understand what is expected of me as a parent and an All- star cheerleader. I will conduct myself in a sportsmanlike manner and uphold the standards that are expected of me as an ICE® All-star parent and cheerleader.

Parent Signature: _____ Date: _____

Cheerleader Signature: _____ Date: _____



AFTERSHOCK PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of ICE®, its owners, agents, officers, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as “ICE®”), I hereby agree to release, discharge, and hold harmless, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I understand and acknowledge that the activities that I or my child engage in while on the premises or under the auspices of ICE® pose known and unknown risks which could result in injury, paralysis, death, emotional distress, or damage to me, my child, to property, or to third parties. The following describes some, but not all, of those risks: Cheerleading and gymnastics, including performances of stunts and use of trampolines, entail certain risks that simply cannot be eliminated without jeopardizing the essential qualities of the activity. Without a certain degree of risk, cheerleading students would not improve their skills and the enjoyment of the sport would be diminished. Cheerleading and gymnastics expose participants to the usual risk of cuts and bruises, and other more serious risks as well. Participants often fall, sprain or break wrists and ankles, and can suffer more serious injuries. Traveling to and from shows, meets and exhibitions, raises the possibilities of any manner of transportation accidents. In any event, if you or your child is injured, medical assistance may be required which you must pay for yourself.
2. I expressly agree and promise to accept and assume all of the risks, known and unknown, connected with ICE®-related activities, including but not limited to performance of stunts and use of trampolines. My participation and that of my child is purely voluntary. No one has forced or coerced me or my child to participate. I elect for myself and my children to participate in such activities in spite of the risks.
3. I hereby voluntarily release, forever discharge, and agree to hold harmless and indemnify ICE® from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with my child’s participation in ICE® -related activities.
4. Should ICE® be required to incur attorney’s fees and costs to enforce this agreement, I agree to indemnify and reimburse them for such fees and costs.
5. I certify that my child has health, accident and liability insurance to cover bodily injury or property damage that may be caused or suffered while participating in this event or activity, or else I agree to bear the costs of such injury or damage to my child. I further certify that I am willing to assume and bear the costs of all risks that may arise or be created, directly or indirectly, through or by any such condition.
6. In the event that I file lawsuit against ICE®, I agree to do so solely in the State of Indiana/Illinois and I further agree that the substantive and procedural laws in that state shall apply in any such action without regard to the conflict of laws rules thereof. I agree that if any portion of this agreement is found void or unenforceable, the remaining portions shall remain in full force and effect.
7. By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation or the participation of any of my children in this activity, I may be found by court of law to have waived my right to maintain a lawsuit against ICE® on the basis of any claim from which I have released ICE® by signing this Agreement.

I have had sufficient opportunity to read this entire document. I have read it and understand it. I agree to be bound by its terms.

Signature of Participant or Parent (if under 18): _____

Print Name: _____ Date: _____

(Must be completed for participants under the age of 18)

In consideration of _____ (print minor’s name) (“Minor”) being permitted by ICE® to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold ICE® from any and all claims which are brought by, or on behalf of Minor and which are in any way connected with such use or participation by Minor.

Parent/Guardian: _____

Print Name: _____ Date: _____