



Central Florida

ATHLETICS

2019-2020

FCC Impact
Half Year Program



EVALUATION PACKET

Thank you for your interest in Central Florida Athletics (CFA) Fellowship of Christian Cheerleaders (FCC) All Star Cheer Impact Program! The 2019-2020 season will be our 1st season working with FCC. We are very excited to join the FCC program, that is celebrating its 31st year, with CFA's 5-year history of providing a fun, safe, and positive environment for All Star Cheer. We have high expectations this season and know that it will take your support to become successful!

Our mission at CFA is to provide high-quality coaching and teaching in all disciplines within cheerleading, but more importantly to teach each athlete the life lessons of hard work, sportsmanship, team work, and integrity. With the addition of the FCC program not only will CFA continue to emphasize traditional All-Star Cheer but also brings the Gospel focus as it relates to teamwork, patience, humility, kindness and more. We encourage each cheerleader to always do their personal best while building friendships and having fun. It is our honor to watch our cheerleaders excel in the sport they love while they grow in their accomplishments and self-esteem.

CFA's All-Star teams will be selected based on age and skill level. There are many different factors taken into consideration when choosing the best fit for each athlete. The coaches will be looking at tumbling level, jumps, stunting ability, performance potential, attitude, maturity and age when selected our 2019-2020 teams. Please know these are evaluations not tryouts. Each child will make a team based on age and skill level.

During team selections, the most common confusion for both parents and athletes relates to tumbling ability. Mastering a skill does not mean that you can land it 'occasionally'. To have mastered a skill, the athlete must be able to perform it consistently with correct form, under pressure, on any given day. Please understand that tumbling is **not** the only factor that determines an athlete's placement. Because one can execute a level 2 tumbling skill does not mean they will be placed on a level 2 team.



Every athlete has a specific purpose for being on each team, please trust all decisions that are made by the staff. Every role and position of athletes on teams are chosen solely by the CFA coaching staff. These roles may also change throughout the season in order to make sure each team has an equal opportunity to compete successfully.

Good luck during evaluations; we look forward to a fantastic season!

CFA Coaching Staff

2019- 2020 ALL STAR EVALUATION INFORMATION

Location

Central Florida Athletics
2250 Heritage Drive, Lakeland, FL 33801
Office: 863-578-3015

Date and Time

Thursday August 29, 2019
6:00-8:00 pm - **All Ages**

Required Documents

The athlete and their family will need to complete the annual registration form, photo release form, and tryout evaluation form. In addition to completing the forms all **new** athletes will need to bring a copy of your birth certificate and a recent photo.

***Athletes will not be allowed to begin the evaluation process until all of these documents have been completed and turned in.**

Evaluation Attire

****Please wear non-baggy athletic black top and shorts, cheerleading or athletic shoes, no jewelry, and hair pulled up into a high ponytail****

Team Placements

Placements will be posted online Friday August 30, 2019



Please remember to bring your Financial Commitment/Credit Card authorization form, Medical Waiver and Member Information Sheet to the CFA Commitment Meeting! (Date and Time to be announced) Returning athletes are required to complete these forms at the start of each season.

Frequently Asked Questions

Q. What are the program costs?

A. The costs vary by team and range from \$1,000.00- \$1,200.00 each season. Additional Expenses that are not included in this estimate include (but are not limited to): travel expenses, competition spectator admission, Nationals and Bid Events, etc.

Q. Will there be fundraising opportunities to help offset these costs?

A. Yes! We understand that All Star Cheerleading is an expensive sport. We provide fundraising opportunities through our parent organized booster club.

Q. Does Central Florida Athletics have a 501 (c) (3)?

A. Yes, we do!

Q. Does the gym provide sponsorship letters to assist families in soliciting support from local businesses?

A. Yes. Sponsor letters can be found at the front desk throughout the cheer season.

Q. Is there a referral program?

A. Yes! For each qualifying new Allstar member referral, a one-time credit of \$25.00 credit will be issued towards your monthly fees.

Q. Does everyone make a team?

A. Yes, everyone will be placed on a team, determined by the CFA coaching staff.

Q. What tumbling skills do I need to make a team?

A. You can refer to our skills breakdown on our website and social media platforms, but being assigned to a team is **not** based solely on a particular tumbling skill.

Q. How are teams selected?

A. Building competitive teams is a complicated process optimizing the number of cheerleaders, number of stunt groups, percentage of skills, showmanship, experience, and talent, while **also** considering the cheerleader's preferences. We build each team similar to how one would build a football team: each person filling a particular spot. Each team has a set number of cheerleaders for each position, depending on the size of the team. Team selections are based on all components of cheer rather than a single ability. Our coaches will evaluate athletic ability based on tumbling, stunting, jump skills, showmanship and dance. In addition, attitude, attendance, maturity, and experience are considered. Just because

someone has a high-level tumbling skill does not mean they should/will be placed on a high-level team.



Q. What if I don't like my placement? I'm shopping around.

A. We build our teams assuming that **everyone** will accept their position on the team based on the coach's comprehensive knowledge of the sport. If cheerleaders do not accept their position, it could have a significant impact on other teams that were created during the evaluation process. The CFA coaching staff assumes that if a cheerleader is going through the evaluation process, they are prepared to accept the position assigned to them. If there are concerns about placement, please contact a coach as soon as possible. We are **NOT** interested in only winning, and we do not believe in progression before perfection. It is our goal to also help your child grow, learn, stretch, and have fun!

Q. How often do the teams practice?

A. All teams practice 2 days a week. Cheerleading is a team activity; therefore 100% attendance is incredibly important to the success of your athlete's team! Attendance is mandatory the week prior to competition.

Q. When will practice begin for the 2019- 2020 season?

A. Team practice will begin the week of September 2nd.

Q. When and where are the competitions?

A. Most of our competitions are located throughout Central Florida.

Q. What are the different team levels and age groups?

A. See the Attached 2019-2020 - Impact - Age/Divisions grid

Q. Can my actions as a parent affect my cheerleader's involvement?

A. Yes! We have an open-door policy and encourage any parent to talk with us about concerns. A misunderstanding can easily be resolved with constructive communication before the situation escalates. Optimism and respect are contagious, and unfortunately negativity is too. We strive to provide a positive and encouraging environment for our cheerleaders, and we need our parent's participation in this endeavor! We are so blessed to have so many great families on our teams. Please talk with us before letting a negative incident fester.



Important Financial Information

Each athlete will be charged a monthly fee. This will include monthly training, and all necessities for the season: Registration fee, competition fees, choreography, music, and an extra in-house skills camp.

Competition fees, membership fees, uniform fees, sponsorships and fundraising monies are non-refundable. There are no exceptions to this rule. If you start the program after August 29, 2019, you will be responsible for missed fees. Since the monthly fees amortize the many aspects that encompass competitive cheer, those fees must be collected. We do require a 30-day written notice to drop your child from the program. You will be responsible for fees through the drop date.

All monthly payments must be paid by the 1st of each month except the evaluation fee due on or before August 29, 2019 and may be paid via the parent portal.

We offer very competitive pricing. To ease the financial burden on our families, we have included most of the necessary items into our monthly fees, including (but not limited to) skills camp, choreography, credentialing fees, music, and several other requisite expenses.



Lakeland
Team Payments Schedule

<i>Month</i>	<i>Payments</i>		
	<i>Tuition</i>	<i>All Star Fees</i>	<i>Total</i>
August	\$35		\$35
September	\$115	\$95	\$210
October	\$115	\$95	\$210
November	\$115	\$95	\$210
December	\$115	\$95	\$210
	\$495	\$380	\$875

Uniform \$125

Shoes \$75



2019 - 2020 Competition Schedule

Event	Event Dates	Location	Spectator Fee
Florida Kickoff Classic	9-Nov-2019	Southeastern University – Lakeland, FL	Free
Florida State Championships	7-Dec-2019	Ocean Center – Daytona Beach, FL	\$ 10.00



31st Annual Nationals	3-Jan-2020	Rosen Shingle Creek Resort – Orlando, FL	\$ 15.00
-----------------------	------------	---	----------

Important Dates

Skills Camp- TBD

Uniform Fitting - September 17, 2019

Choreography (Estimated dates*) - TBD- August/ Beginning of September

T-Shirt Sponsorship Recognition - Money Due - Last Date - Oct 11th

Showcase - Sunday, November 17th

Team Pictures - TBD



Holiday Schedule

Labor Day – September 2nd -NO PRACTICE

Halloween- October 31st - NO PRACTICE

Thanksgiving Break – November 25th- 29th - NO PRACTICE

Christmas Break – December 23rd – December 27th - NO PRACTICE

2019- 2020

All Star Level Evaluation Application Cheerleader Information

COACHES USE ONLY

Athlete Name: _____

Age as of 8/31/2019: _____

School District: _____ **School:** _____ **Grade:** _____

School Cheer: Sideline ☐ Competition ☐ Both ☐

Season length & Important Dates:



Previous cheer experience: _____

Highest level competed? _____ Where? _____

Stunt Position (Check one) Main Base ☐ Side Base ☐ Base (any) ☐ Backspot ☐

Social Media Accounts (optional):

Snap Chat: _____ Twitter: _____

Facebook: _____ Instagram: _____

COACHES USE ONLY

Level 2

- T-Jump BHS Step Out BWO BHS
- Standing 3 BHS
- FWO RBHSS

Level 3

- 3 jump 3 BHS TUCK
- Punch front RBHT + ROT

Comments

Level 4

- T-jump tuck
- 3 Jump hand hand layout
- Running flip to layout
- *handspring layout
- *standing flip to layout

Level 5

- 4 jump tuck
- Toe 2 to full
- Running flip to full
- *one to full
- *standing full
- *Double full
- *specialty double

Jumps 1 2 3 4 5

Overall
Tumbling 1 2 3 4 5

Attitude 1 2 3 4 5



INFORMED CONSENT AND PARTICIPATION RELEASE

I/We, _____, parent(s) and/or guardian(s) of _____, who is a participant in the Central Florida Athletics (CFA) Program or participant in CFA Gym Activities, are herewith allowing our son/daughter to participate in such activity, and give our consent for such participation by our son/daughter.

We understand that our son/daughter is required to be in good physical shape and condition and that the activities which he/she will be asked and expected to participate in are strenuous and require physical and athletic agility. It has been fully explained to us that these activities include, but are not necessarily limited to a variety of gymnastic routines, including somersaults, back handsprings, aerials and round-offs; that there will be a variety of mounts and stunts requiring the coordination of more than one participant on the squad; that these activities will not be confined to any one site or venue, but rather a variety of sites and places throughout practices and competitions.

It has also been explained to us that cheerleading is an activity in which the risk of injury is high; that any one of the routines involving our son's/daughter's participation in cheerleading activities in general could lead to serious injury, including partial or total paralysis, even death. We have also discussed this with our child and among ourselves. Despite this understanding of the possibility of serious or catastrophic injury or death and the risks involved, we still consent to the participation in this activity by our son/daughter. Our child's participation in this activity is purely voluntary and we elect their participation in spite of the risks. I/we also certify that we have adequate insurance to cover any injury or damage that our child may suffer while participating, or else I/we agree to bear the costs of such injury or damage ourselves.

We also understand that our son/daughter will be required to travel to locations for performances and competitions and that we, as parent and/or guardian, will be responsible for our child's transportation.

We represent to CFA Cheerleading that, to the best of our knowledge and belief, our son/daughter has no physical, medical, or mental disability or other limitation that would restrict his/her ability to fully participate in this activity as described and explained to us. We agree to this informed consent and by the signing of this Participation Agreement, voluntarily release, forever discharge and agree to indemnify and hold harmless the directors, owners, coaches, assistant coaches, trainers, and volunteers of Central Florida Athletics Cheerleading, from any and all claims of negligence by ourselves, our son/daughter, or heirs, executors and assigns, from any liability arising from claims for damages for injury to our son/daughter and any claims for loss of or damage to his/her property which may arise out of his/her participation in CFA Cheerleading.

Parental Consent:

In witness whereof, I/we have affixed our signatures to this Informed Consent and Participation Agreement on this ____ day of _____, 2019 in the State of Florida.

(Parent Name)

(Date)

(Parent Signature)

(Date)

PARENT COMMITMENT

We would like to take this opportunity to share and explain how we select the team on which your child will participate. As with any sport, there are various levels of talent and various strengths within each athlete. It is also



Important to us that your child is placed on a team where he or she will grow and succeed. We feel it is important that we create the strongest teams possible. It is in our best interest to create teams with a balanced number of flyers, bases, dancers, and tumblers.

There is no first and second team in the Central Florida Athletics (CFA) cheerleading program. Please know that the squads are named and chosen appropriately and help us to assure your child's position at CFA is in his/her best interest. It is important that all of our parents and athletes understand this and are committed to sharing our philosophy. We feel fortunate to have the best family and friendship bonds because we have the best parents and family support around! The CFA Staff is ready for another outstanding and successful year!

By signing below, I/we agree to the following:

☐ All conversations in the parent viewing areas must be respectful and positive. Any rude comments could result in dismissal from the program.

Practices and activities on and around the gym are being recorded for both security and safety.

Only cheerleaders and coaches are allowed on the practice floor.

The coaches reserve the right to close practices at any time for any reason.

No athlete or parent may post inappropriate messages or comments on FACEBOOK, INSTAGRAM or any other social media/website about our own program, another program or individual.

The CFA logo cannot be copied and printed on any individual apparel or other items.

We reserve the right to dismiss your athlete from the program for any of the following reasons: inappropriate behavior, too many absences, a pattern of lateness, not showing to competition, or delinquent fees.

No parent may ever reprimand or discipline someone else's child. We will handle any disciplinary problems privately and professionally.

You agree to the CFA philosophy of team selection and also agree to show sportsmanlike conduct at all times, understand that coaches' decisions are final, and the parent's position in the gym is to provide a positive outlook for all children.

ABSENCES

Athletes are expected to attend every practice. Absences will be reviewed on an individual basis. Anything beyond 3 unexcused absences is highly frowned upon and may be grounds for dismissal from the program. Attendance will be kept throughout the season showing all absences and nature of absence. All summer absences due to other commitments/obligations or family visitation rights must be made known immediately. Understand that your child's participation is a year-long commitment and you will help us instill the importance of this dedication.

EXCUSED absences include but not limited to:

- ☐ Death in the family
- ☐ School related function that reflects a grade
- ☐ A contagious illness with doctor's note

UNEXCUSED absences include but not limited to:

- ☐ Jobs, Sickness, cramps
- ☐ Dances, birthday parties, concerts, etc.
- ☐ School projects and homework, High School Sports practices or events

By signing below, I agree to cooperate in this manner.

Parent Name

Parent Signature

Date

CHEERLEADER COMMITMENT AND PROGRAM RULES

I understand that coaches' decisions are final and will come to practice prepared to work hard at the sport I love!

I understand that my participation is a year-long commitment and my position and dedication to my team is important.



Students always show respect for the coaches, fellow teammates, other CFA Athletes, parents, judges, officials and spectators. Disrespectful behavior could result in probation from team or dismissal from the Central Florida Athletics (CFA) Program.

I will not post inappropriate messages on FACEBOOK, INSTAGRAM or any other Social Media/website regarding our own program, another program or individual.

I will be modest when our team is successful and gracious when we have a loss.

Gym/Practice

- ☐ No Jewelry
- ☐ No long fingernails
- ☐ Bloomers and sports bra must be worn by ALL female athletes.
- ☐ Long hair must be pulled back in a hair elastic.
- ☐ All account balances must be current in order to practice.
- ☐ No parents, siblings, or friends will be allowed in the gym area.
- ☐ All cell phones must be left on silent or out of the gym.
- ☐ You must practice in cheerleading shorts, an appropriate top, and appropriate shoes.
- ☐ No gum, food, or colored beverages on the mats

Competition, Camps or Clinics

- ☐ Hair must be done to coach's specification
- ☐ Make-up must be brought and worn at coach's discretion
- ☐ Attendance at all CFA functions is mandatory
- ☐ All team members will stay at events until released by their coach
- ☐ All cheerleaders will dress in specified CFA attire at all events
- ☐ Central Florida Athletics cheerleaders and parents/family members will conduct themselves in proper behavior at all times (i.e. practices, competitions, on the internet, and all other events)
- ☐ Zero tolerance will be implemented for fighting or the use of alcohol or drugs at any CFA function
- ☐ Tobacco and the use of profanity will be punishable at the coach's discretion
- ☐ Set a positive example for others to follow
- ☐ Be respectful and courteous to everyone
- ☐ Refrain from gossiping or any form of verbal or physical confrontation
- ☐ Refrain from celebrating the misfortune or defeat of another person, team, or program
- ☐ Accept team placement and awards with dignity and class

By signing below, I agree to commit my time, skills, and abilities to my team for the 2018-2019 season.

Cheerleader's Signature

Date

Parent Signature

Date

PHOTO RELEASE & ACCEPTANCE

I, as parent/guardian of _____, grant permission to Central Florida Athletics to use photographs or video taken of my child at the Central Florida Athletics (CFA), competitions, performances, or fundraisers for use in publications, CFA's website or other electronic forms or media to promote the CFA cheer program.

I hereby waive any right to inspect or approve the finished photographs or printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the photograph. I hereby agree to



release, defend, and hold harmless the Central Florida Athletics including any firm publishing and/or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the photographs, including, but not limited to any misuses, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that product, its publication or distribution.

I have read this release & by signing below, I acknowledge I fully understand the contents, meaning and impact. I understand that I am free to address questions regarding this release by submitting those questions in writing. My failure to do so will be interpreted as a free/knowledgeable acceptance of the terms of this release.

Parent Name

Date

Parent Signature

Date

FINANCIAL OBLIGATIONS

All payments are due on the 1st of each month. Payments received AFTER the 5th will result in a \$30.00 late fee, and will be automatically charged to your account. Failure to meet Payment Deadlines and lack of reasonable and fair communication regarding payments will result in your child's loss of services (sitting out of practice) and/or dismissal from the program. Please note, we reserve the right to replace the athlete if this happens.

Phone calls, emails and meetings regarding past due accounts are a courtesy. Fee schedules are supplied at the beginning of the season. It is your responsibility to make your payments on time and in full.

Your Cheerleader's account must have a ZERO balance by the 15th of each month throughout the season. Failure to pay your balance will result in loss of services (sitting out of practice) and/or dismissal from the program.



- By signing below, I understand these rules and regulations, the payment and financial obligations, and fully agree to comply with all the above.**

Annual Registration – Permission - Health Form

Phone: 863-578-3015



Occupation _____
Work# _____
Cell# _____
Emergency Contact (other than parent) _____ Relationship to child _____
Cell# _____ Home# _____ Work# _____
Name of Doctor _____ Phone _____
Name of Insurance Carrier _____ Phone _____
Should your child be restricted in/from any activity? Yes _____ No _____ If yes, please list:

_____ (Please attach a separate page if additional space is necessary.)

Please complete the following questions about your child's health history. Circle yes or no and/or fill in the appropriate blanks.

Any recent exposure to contagious diseases? Yes No If yes, what disease? _____ When?

Any recent operations? Yes No If yes, give type of operation and date: _____

Any recent serious injuries/illness? Yes No If yes, give description and date of injury/illness: _____

List present medications and why medication is being taken:

Suffers from:	Asthma:	Yes	No	Lung Disease:	Yes	No	Epilepsy:	Yes/No
Diabetes:	Yes	No	Takes Insulin:	Yes	No	Cardiovascular:	Yes/No	
Chronic Infection of:	Nose:	Yes	No	Throat:	Yes	No		
	Ears:	Yes	No	Sinus:	Yes	No		
Subject to:	Fainting:	Yes	No	Headaches:	Yes	No	Hyperactivity:	Yes/No
	Bedwetting:	Yes	No	Sleepwalking:	Yes	No	Motion Sickness:	Yes/No
	Nose Bleeds:	Yes	No	Restlessness:	Yes	No		

Does your child have any type of allergies? If yes, please list:

If your child is female, has she menstruated? Yes No Is the menstrual painful and/or irregular? Yes No

Last Tetanus inoculation date _____ Any other additional information _____



I agree that the information I have provided on this form is true and complete to the best of my knowledge. **Parent initials:** _____

Should you desire Central Florida Athletics LLC to administer your child=s medication, a written consent form must be completed by the parent and given to Central Florida Athletics LLC. Central Florida Athletics LLC may refuse to give medication. Medication must be in a proper container with the child=s name and dosage information clearly marked. **Parent initials:** _____

If the child has suffered a serious accident or illness within the past twelve (12) months, is subject to a serious health condition, or there is any question about activity restriction, further information from the child=s doctor or specific permission to participate may be required at the discretion of Central Florida Athletics LLC. Central Florida Athletics LLC=s staff and volunteers are not qualified to care for some children with special needs. Central Florida Athletics LLC will only accept those children after evaluation. **Parent initials:** _____

In the event that my child suffers any illness or injury requiring emergency treatment while involved in any Central Florida Athletics LLC activity, I hereby give my permission for any necessary hospitalization, medication, surgery on the recommendation of medical personnel, in which case I will be solely responsible for all costs. **Parent initials:** _____

RELEASE, HOLD HARMLESS AND EXCULPATORY AGREEMENT

Physical activities like cheerleading, tumbling and gymnastics, as with all sports activities, carries an inherent risk of bodily injury or even death. These risks also extend to those present in our facility even if they are not actively participating in the activities. Such risks can be minimized through proper instruction, supervision and education, but such risks can never be eliminated. Your knowledge and appreciation of these risks is extremely important to your making an informed decision.

By signing this document, either individually, and/or in the capacity of a natural or legal guardian, you acknowledge the inherent risks of bodily injury, psychological injury, or even death, in cheerleading, tumbling and sporting activities, as well as through presence as a spectator. By signing this document you, individually and/or in the capacity of a natural or legal guardian, hereby release, hold harmless and exculpate Central Florida Athletics LLC, its owners, employees, volunteers, agents and representatives, from any and all liability for their negligence in allegedly bringing about bodily injury, psychological injury or death, as well as to any claims of negligence, as set forth above, further extends to any defective condition of the premises whether or not known to Central Florida Athletics LLC, or its owners, employees, volunteers, agents and representatives, and whether occurring on or off premises or during transportation to or from the premises or other events.



****NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN****

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF CENTRAL FLORIDA ATHLETICS LLC USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM CENTRAL FLORIDA ATHLETICS LLC IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND CENTRAL FLORIDA ATHLETICS LLC HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

Signature of Parent/Legal Guardian

Date

Printed Name of Parent/Legal Guardian

Date

Staff use only: Date registered _____ Payment type/check # _____ Receipt # _____ Staff Initials _____

Financial Commitment/Credit Card Authorization Form

I have read and fully understand my financial commitment to Central Florida Athletics outlined in this tryout packet. I understand that my commitment is for the 2019-2020 All-star competitive season. I understand that I am giving my credit card/debit card information, and that this information will be used to process a payment if I do not meet payment deadlines to Central Florida Athletics. I understand that I forfeit any monies paid if the Athlete chooses to leave a team



or is asked to leave the program. I understand that I am entering into this payment program of my own free will.

Parent's Signature _____ Date _____

Name as It Appears on this Card: _____

Billing Address: _____

Zip Code _____

Type of Card: (CIRCLE ONE) Visa MasterCard Discover American Express

Credit Card # _____

Exp. Date _____ Security Code (Back of card) _____

Cardholder's Signature _____

Date: _____

Athlete's Name _____

Everyone is required to submit credit card information and to be on auto-pay. Accounts are due on the first of every month. Payment is expected on or before the 5th of the month. Your credit card will be charged for any outstanding balance on the 6th. Non-payment and/or declined credit card will result in a \$30.00 late fee.