

HOT Special Needs Team

Interest Meeting

Welcome!

Join the Heart of Texas Family! Thank you for your interest in our special needs program at Heart of Texas! This will be our first year for this program and we know it will be a wonderful place for athletes with special needs to learn the fundamentals of cheerleading and dance. At HOT, we encourage all of our athletes to reach the highest of their potential while trying to teach life lessons that will stay with the athletes well beyond their years in the gym. We are grateful for your interest in our program and thank you for the opportunity to become a part of your family's life! We look forward to getting to know each of you over the coming months and encourage you to contact us with any questions you have.

Sincerely,
Cindy Herbst-
Owner and Program Director cindyherbst@heartoftexascheer.com
Kay Young
Operations Manager kayyoung@heartoftexascheer.com
Melissa O'Hare-
Team Coach

Registration Information

You may reserve your spot for the 2017 – 2018 team by turning in the Athlete Information form attached to the back of this packet

Practice Day & Times

Saturday's 11:00-12:30 (to start)

Performances

Athletes will perform at approximately two to three events throughout the season. Most performances will be recognized at the awards ceremony at each competition. A list of performances will be given as soon as possible. Please keep in mind that the performance schedule is subject to change throughout the season; your flexibility and patience with this is appreciated. In addition to performances, the athletes can anticipate team bonding activities, a holiday party, team photos and an end-of-season banquet.

Financial Obligations

Thank you for careful consideration of the financial commitment involved with participation in our program. Training is free; however there will be a small monthly team fee.

Team Fees: \$30 per month. This covers event entry fees, support staff, banquet, parties, audio mixes, gifts, and various miscellaneous expenses.

Practice Clothes & Uniforms:

Each athlete is required to purchase his/her own practice clothes and uniform. Fund Raisers and sponsorships will be provided. Practice clothes are \$50 it will include a practice top and practice shorts. The uniform fee is \$130 this does not include shoes. Shoes can be purchased locally or online. Required uniform expenses will be divided into 2 equal payments. The first payment is due upon ordering and the second will be due in order to ship.

Miscellaneous:

Our goal is to include all costs in the team fees; however, additional costs may be incurred throughout the season. Additional fees may be admission/parking fees at performances, banquet costs for guests, and any optional items such as bags, warm ups, and extra shoes/socks/bow



Heart of Texas Cheer and Dance
8081 Robinson Industrial Park Dr.
Waco, Tx. 76706 (254)666-7470
cindy.herbst@heartoftexascheer.com

Payment Contract Agreement 2017-2018

Student Name:		Date of Birth:	
Home Address:		City:	Zip:
Billing Email:		Home Phone:	
Mother's Name:	Work:	Cell:	
Father's Name:	Work:	Cell:	
Emergency Contact:		Phone:	

Terms of Agreement Please READ carefully and initial in the spaces provided

For the 2017-2018 competitive season, Heart of Texas has a fixed cost of 6 monthly tuition installments of \$30. Based on the starting date of Dec. 2017 ending April 2018.

I acknowledge that, under the terms of this Agreement, the above named student will be charge all tuition and will be payable on the 1st of the month, unless other arrangements have been made

Medical Release and Policy Acknowledgment

I, the parent or legal guardian of the above named student hereafter referred to as "student", do hereby permit the "student", to participate in tumbling, cheerleading or any other physical activities while a student at Heart of Texas Cheerleading LLC. Hereafter referred to as HOT. By granting permission for "student" to participate at HOT, I assume full responsibility for "student's" personal safety and release HOT, its directors and employees from any and all liabilities that may arise due to any injury including death to "student" by reason of "student's" participation at HOT or in which HOT is participating elsewhere.

I understand there is personal risk involved in any activity that involves motion, height, or rotation and that these activities can result in serious injury, disability, or death.

I declare "student" has been seen by a physician and is cleared to participate in physical activities such as tumbling, jumping and cheerleading.

I authorize HOT to use photographs, video, and/or other likenesses of "student" for use in HOT promotional materials or sales and waive any rights of compensation or ownership thereto.

By signing this form, you agree to the above stated terms and acknowledge your financial commitment to Heart of Texas

Signature: _____ **Date:** _____

If you were referred by a current HOT member/Coach, please give them credit here. Name: _____

MANDATORY Credit Card Authorization Form

Card Holder Information

Name of Student: _____

Name on Card: _____

Card Billing Address: _____

City: _____

State: _____

Zip: _____

Payment Authorization

Card Type: Visa Master Card

Card Number: _____

Expiration Date: _____

Card Identification Number (3 digits on back): _____

I/We hereby authorize Heart of Texas LLC. to charge this credit card on a monthly basis for the amount due on our account. My/Our credit card will be charged by the 5th day of each month for the amount due. If necessary, HOT may initiate credit adjustments for any charges made in error. HOT also may charge my card for periodic miscellaneous charges at my request. This authorization is to remain in full force and effect until HOT has received written notification from me (or either of us) of termination of this service in such time and such a manner as to afford HOT a reasonable opportunity to act upon it. Written notice may be provided either to the address or email above.

Signature: _____ Date: _____

ACH Debit Authorization

Authorization Agreement for Direct Payments

I (we) hereby authorize Heart of Texas to initiate debit entries to my (our) ____CHECKING ACCOUNT or ____SAVINGS ACCOUNT (select one) indicated below at the depository financial institution named below, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of US law.

Depository Name: _____

Routing Number (9 digits): _____

Account Number: _____

This authorization is to remain in full force and effect until Heart of Texas has received written notification for me of its termination in such time and in such manner as to afford Heart of Texas and your bank a reasonable opportunity to act on it.

Signature: _____ Date: _____

