



VIRGINIA WILD FINANCIAL AGREEMENT

This Agreement is made and entered this _____ day of _____, 20____, between Virginia Wild, NCTC, Inc. and _____ (Responsible Party). The Responsible party, as parent/legal guardian of _____ (Athlete) hereby agrees as follows:

1. I understand the commitment, standards, and financial obligation involved with joining a team and becoming a member of Virginia Wild.
2. I understand that competitive cheerleading and dance is a yearlong commitment and it is my intention to remain at Virginia Wild for the entire season. I further understand that if I chose to remove my athlete for any reason or if he/she is removed from the program for any reason, all fees including, but not limited to, choreography fees, coaches' fees, competition fees, uniform, practice wear, and tuition are NON-REFUNDABLE.
3. I agree to pay all fees associated with being a member of Virginia Wild from the time of joining until my athlete is officially removed from the program. A 30 day written notice is required to be officially removed from the program. A withdrawal form can be obtained from the office. Your account will continue to be billed until this notice is received.
4. I understand it is my responsibility to keep up with my account. Statements of the athletes account can be obtained by request or can be accessed at any time through the Parent Portal on the website. I understand that failure to receive statements does not mean I am not responsible for the charges to my account.
5. I understand that my balance must be paid in full at the beginning of each month. I further understand that if my balance is not paid by the 10th of that month, my account will automatically be assessed a late fee of \$15.
6. I understand that if my account is not paid in full by the 15th of each month, the credit card provided on the next page will be charged for any unpaid fees, including but not limited to coaches, fees, competition fees, double team fees and late fees. I understand it is my responsibility to provide updated credit card information if the card on file has expired or is otherwise replaced.
7. I understand that if my account becomes delinquent, my athlete may be asked to sit out of practices and competitions until the account is brought current. I also understand that if my account becomes more than two months delinquent it may be sent to a collection agency and I will liable for any and all fees associated with collection of the account, including attorney fees.
8. I understand that due to the nature of many fundraising policies, any credit or overpayment on my account from fundraising proceeds will be forfeited if my athlete withdrawals, or is removed, from the program for any reason. I further understand that any monetary awards received by a team or the program will be utilized at the discretion of the program.
9. I agree that my athlete and I will adhere to the policies and standards established by Virginia Wild. I realize that failure to do so may result in my access to the Virginia Wild facility being restricted or my athlete being withdrawn from the program.

_____ Initial

Everyone must provide a credit card number for monthly payments. You must provide full credit/debit card information; this will be entered into our system. You can still pay by check or cash before the 15th; however, if not paid by the 15th, your credit/debit card will be automatically debited.

I authorize Virginia Wild National Cheerleading Training Center to withdraw funds from my:

(Check one) _____ VISA _____ MASTER CARD

Furthermore, if any such debt(s) drawn off of the account is returned unpaid by credit card or check payment, I authorize Virginia Wild to collect a return item charge fee of \$30 by electronic debit.

I understand a \$1 authorization charge will be made to the account listed below for verification purposes.

Athlete's Name _____

Name (as it appears on the card) _____

Card # _____

Exp Date _____ Billing Zip Code _____ Security code _____

Phone # _____

I have read and understand the financial policies of Virginia Wild. I agree to be responsible for any and all charges for the athlete. I am a duly authorized credit card user on the identified account and authorize all of the above with my signature.

Cardholder Signature

Date

Responsible Party Printed Name

Athlete Printed Name

Responsible Party Signature

Date

Auto Draft Authorization

With my signature below, I authorize Virginia Wild to withdrawal funds from the above referenced account on a recurring monthly basis. All recurring charges will be processed on the 1st of each month. This authorization will remain in full effect until Virginia Wild has received written notification from me of its termination in such time and in such a manner as to afford Virginia Wild a reasonable opportunity to act upon it. Recurring charges will terminate at that end of the current season. I have read and understand the financial policies of Virginia Wild. I agree to be responsible for any and all charges for the athlete. I am a duly authorized credit card user on the identified account and authorize all of the above with my signature.

Cardholder Signature

Date

_____ **Initial**