

Power Cheer Gym Registration and Payment Record 2011-12

Athlete Name: _____ **Team:** Mini Youth 2 Junior 2
 Junior 3 Senior 2 Senior 3 Senior 4

Parent or Person Responsible for Athlete Payments: _____

Home Phone Number: _____ PARENT email: _____

Contact Person/Parent/Guardian Cell#: _____

Mailing Address: Street: _____ City: _____

Postal Code: _____ **BIRTH DATE of ATHLETE:** _____ **mm/dd/yy**

AGE AS OF August 31, 2011: _____ (USASF Eligibility Cut off date)

There are **THREE** Items Dues at Sign Up

1. Annual Gym Membership Fee: \$ _____ *Credit / Debit / Cash / Chq*

2. Parent Association Fee: \$ _____ *Credit / Debit / Cash / Chq*

3. Team Tuition Fee: *as per A or B below*

A. Full Payment Option Amt _____ Month _____ *Credit / Debit / Cash / Chq*

B. 2, 3 or 4 Part Payment Option Amt _____ Amt _____ Amt _____ Amt _____
Month _____ Month _____ Month _____ Month _____

Other Payments Made at Registration may include:

4. Summer Practices not covered by Tuition: \$ _____ *Credit / Debit / Cash / Chq*

5. August Training Camp: \$ _____ *Credit / Debit / Cash / Chq*

6. Summer Prep Class: \$ _____ *Credit / Debit / Cash / Chq*

I am the legal guardian of the above athlete (or a member that is 18 years of age) and I agree to all terms stated in the payment and refund policies and that the fees chart has been viewed, explained and understood.

Date

Signature of Guardian/or Athlete 18 years of age

**If using pre-authorized credit card payment – fill in and sign section below*

Pre Authorized use of Credit Card for fee payment: (Mastercard Visa)

Name on Credit Card: _____

Credit Card Number: _____ - _____ - _____ - _____ Expiry Date: _____

I hereby authorize Power Cheer Gym to use my credit card for the above payment options and amounts. Use of the card is limited to the checked number of payments at the agreed intervals and amounts only.

Signature of Card Holder: _____ Date: _____

REFUND POLICIES: Please read and understand all PCG fee refund policies (separate page)

NOTES: