TRYOUT NUMBER:



2020-2021 SI SPIRIT ALL STAR TRYOUT PACKET

64B MARJORIE STREET, 120 ANDROVETTE STREET | STATEN ISLAND, NY 10309 | 718-966-4588 | SISPIRIT@AOL.COM

WWW.SISPIRIT.COM

Overview

WELCOME TO THE SI SPIRIT ALL STARS!

Please print and read through this packet in its entirety, return to the front desk, completely filled out, on Orientation & Registration day with any payments due.

PLACEMENTS:

Check the website (SISPIRIT.COM) for your team placement. Placements will posted by Monday June 22nd.

There you will find your first practice date and time. Practices will begin Monday, July 6th. All Practice schedules will be sent to you via email.

REGISTRATION Deadline 6/29:

All pages of this packet will need to be filled out electronically and EMAILED back to SI SPIRIT along with payment by June 29th in order for us to place you on our roster and count you as an active participant for the 2020-2021 season.

FAQ and PROGRAM OVERVIEW:

Q: What is SI Spirit All Star Cheerleading?

A: All Star cheerleading is a competitive sport that involves boys and girls ages 3-18 performing a routine composed of tumbling, stunting, pyramids and dance segments. This routine is performed and scored against other competitive teams at various local, regional and national competitions. This allows your child to grow and develop as an athlete and learn the values of responsibility and team work from our professionally trained coaching staff.

Q: How do you select and place athletes at tryouts?

A: We select teams to be the most competitive in each level. We base these placements on physical ability (jumps, tumble, motions, etc.), as well as past cheer experience. Team placements are to be made at the discretion of the coaching staff based on ALL abilities, not solely tumbling.

Q: How much will it cost?

A: Depending on the team your child qualifies for, pricing varies. We have attached complete price breakdowns for your reference.

Q: How many days a week do we practice?

A: Depending on the team, teams practice between 1 - 3 days a week, not including tumbling. However, there are times when extra practices may be added. All extra practices are mandatory.

Q: What traveling is involved?

A: We will release a competition schedule by September. Most competitions will be within driving distance (such as, but not limited to Baltimore, Philadelphia, Atlanta Georgia etc.) with the exception The Summit in Orlando, FL. (for qualifying teams only). For all sleep away competitions you must arrive Friday night. All competitions and events are mandatory to attend. Some competitions require flights.

Q: What kind of commitment is SI Spirit All Stars?

A: All athletes are expected to attend every practice and all choreography, camps & clinics. All competitions are mandatory. Failure to attend a competition will result in immediate dismissal from the program.

Q: USASF Age Grid for the 2020-2021 season.

A: See attached age grid from USASF

Q: What is the difference between Prep & Non-Prep All Star?

A: All Star prep was started to offer a program that is generally less expensive, less commitment and an introductory step into non-prep all star. Prep teams may practice less days a week and have less demanding requirements. They will wear the same uniform as traditional teams and compete at all the same events with the exception of The Summit. Prep teams will only compete 1 day at any 2 day national events.

Fee Explanation

EXPENSES

EXHIBITION		PREP		ELITE	
NEW	RETURNING	NEW	RETURNING	NEW	RETURNING
REGISTRATION:	REGISTRATION:	REGISTRATION:	REGISTRATION:	REGISTRATION:	REGISTRATION:
\$125	\$75	\$125	\$75	\$125	\$75
IN-GYM TUITION:					
\$85/MO	\$85/MO	\$135/MO	\$135/MO	\$135/MO	\$135/MO

BELOW ARE WHAT ESTIMATED PAYMENTS WOULD BE AS AN EXAMPLE OF A AUGUST 1ST IN GYM SEASON WITH RELAXED SOCIAL DISTANCING REQUIREMENTS ALLOWING FOR AN 9 MONTH COMPETITIVE SEASON.

EXHIBITION		PREP		ELITE	
\$185 / mo.	\$138 / mo.	\$305 / mo.	\$255 / mo.	\$365 / mo.	\$320 / mo.
This includes: - Monthly Tuition (Aug April) - Competition Fees - Competition Uniform - Routine Music - Warm-Up Jacket	This includes: - Monthly Tuition (Aug April) - Monthly Tuition - Competition Fees - Routine Music - Warm-Up Jacket	This includes: - Monthly Tuition (Aug April) - Choreography - Competition Fees - Competition Uniform - Routine Music - Warm-Up Jacket	This includes: - Monthly Tuition (Aug April) - Choreography - Competition Fees - Routine Music - Warm-Up Jacket	This includes: - Monthly Tuition (Aug April) - Choreography - Competition Fees - Competition Uniform - Routine Music - Warm-Up Jacket	This includes: - Monthly Tuition (Aug April) - Choreography - Competition Fees - Routine Music - Warm-Up Jacket
				Crossover fee: (Addt'l. per n	nonth starting Aug. 1) \$192

ADD-ON AND OPTIONAL ITEMS

ltem	Price
Uniform Top/Skirt	\$240/\$185
Uniform Crossover Piece (All NON Senior Teams)	\$75
Competition Scrunchy	\$30
Hair Piece	\$35
Warm Up Jacket	\$65

SIBLING DISCOUNT

\$25 off per month for the 2nd child \$35 off per month for the 3rd + child

AUTO PAY:

This is mandatory for all families to have on file. **We ask each family to submit TWO credit cards** in the event the initial card on file is declined/expired. If you would like to use the automatic payment option to have these fees automatically charged on their due date, you may select that option on the "Credit Card Authorization Form" located on Page 6.

ALL Expenses MUST be paid by their due date. NO EXCEPTIONS. Any outstanding balances will be charged to your credit card on file, along with a \$15 late fee, without notice. No child will be permitted to participate unless all necessary paperwork and payments are handed in.

CROSSOVERS:

Those who choose to crossover to a second team will be responsible to be the "Crossover fee" outlined on out expense sheet. Checking off "Crossover" on your tryout registration form DOES NOT automatically qualify you to be placed on 2 teams. Crossovers will be chosen at the discretion of the coaches.

FUNDRAISING:

To help alleviate costs, sponsorship forms and order forms for worlds finest fundraising will be made available along with other fundraiser run by our Team Parents. These option will be available as the season goes on.

MEASUREMENT DAY:

TBA

CONTACT: Teams and parents will use **Band App** to communicate throughout the season.

*Monthly fees do NOT include travel, hotel costs or The Regional Summit/The Summit.

SI SPIRIT'S Important Dates and Gym Closings

ANYONE WHO IS UNABLE TO ATTEND CHOREOGRAPHY, COMPETITIONS WEEKENDS OR CLINIC DAYS WILL NOT BE ALLOWED TO PARTICIPATE IN THE 2020-2021 SI SPIRIT SEASON.

Choreography: We are tentatively holding dates between the last week of September-the second week of October. Date may change based on guidelines recommended by the CDC/WHO and the local authorities.

Clean-Up Clinic: Dates TBA will be held in February OR March for Non-Prep teams only.

Competition Dates: This is a tentative list of what competitions we will potentially be attending. WE WILL NOT BE ATTENDING ALL OF THESE EVENTS. Dates can be added/removed at the discretion of SI SPIRIT.

Tiny teams will not be attending over night events

Showcase - TBD
January 16, 2021 - Trenton, NJ
January 23-24, 2021 - Baltimore, MD
February 6, 2021 - Trenton, NJ
February 6-7, 2021 - National Harbor, MD
February 13-14, 2021 - Atlanta, GA
March 14, 2021 - Asbury Park, NJ
March 13-14, 2021 - Providence, RI
March 20, 2021 - Trenton, NJ

April 17-18, 2021 Regional Summit for qualifying teams

April 29-May 2, 2021 The Summit for qualifying team - Junior/Senior Teams ONLY

Gym Closings:

Memorial Day | May 25th
Fathers Day | June 21st,
Independence Day | July 4th
Labor Day | September 5th - September 7th
Halloween | October 31st
Thanksgiving | November 26th
Christmas | December 23rd - 25th
New Years | December 31st - January 1st
Palm Sunday | March 28th
Easter | April 4th

If possible, please schedule vacations within these dates so practices are not missed. Excessive absences will not be permitted.

BY SIGNING BELOW YOU UNDERSTAND AND AGREE TO THE INFORMATION ABOVE

ATHLETE NAME	TEAM
PARENT/GUARDIAN SIGNATURE: _	DATE:

Absentee Form

Absence Policy

Summer and winter practice schedules will be given out once teams have been made. All practices are MANDATORY. Each practice is important for the success of each team. Abuse of our attendance policy will be grounds for dismissal from the program.

If for any reason an athlete MUST miss practice for an excused reason, a coach of the team must be contacted directly prior to practice. DO NOT CALL THE GYM, we may not be open yet.

Some unexcused absences are but not limited to: Birthday parties, school dances, homework, non-graded school functions, concerts, other sports and games.

Vacation Dates / Known days of absence

Below, Please list any currently known vacation and absences. This form **does not** excuse your athlete from important practice dates, choreography dates and competitions. A coach should be contacted with a reminder of any dates listed on this form.

PLEASE BE AWARE THAT EXCESSIVE ABSENCES ARE NOT PERMITTED.

1:	Date from:	/	/	To:	/	/
2:	Date from:	/	/	To:	/	/
3:	Date from:	/	/_	To:	/	/
4:	Date from:	/	/	To:	/	/
Reminder: A coach must still be contacted	ed prior to these m	nissed dat	tes to rei	mind them	you will r	not be there.
Athletes Full Name:	Team	າ:				
Please initial below to acknowledge your ur Choreography policy above:	nderstanding of t	he SI Sp	irit Vaca	ation Date	s, Misse	d Practice &
INITIAL						



MANDATORY Credit Card Authorization Form

No Athlete will be permitted to participate without this form on file

64B Marjorie Street – 120 Androvette Street Staten Island, NY 10309 (718) 966.4588

Schedule your payments to be automatically charged to your credit card. Just complete and sign this form to get started!

Recurring Payments Will Make Your Life Easier:

CVV (3 digit number on back of Visa/MC, 4 digits on front of Amex)

- It's convenient (saving you time)
- Your payment is always on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your Visa, MasterCard, Discover card or American Express to avoid late fees and hold a good financial standing on your account.

Late Payments:

Cardholder Name

I Would like:

Any payments not paid by the 10th of the month (based on the All Star Expense Sheet) will have this card charged for the amount due along with a \$15 late fee without notice.

INITI	AL				_
Please complet	e the information	below:			
	rs full name)	_ authorize SI \$	Spirit Inc. to charge my o	credit card indicated below for	
	ull name)	zes SI Spirit I	nc. to charge this card	rleading Fees as indicated for any payment	
Billing Address			_ Phone #		
City	State	Zip	Email		
Card Type: VISA	MASTERCARD	DISCOVER	AMERICAN EXPRESS		

I authorize the above named business to charge the credit card indicated on this authorization form according to the terms outlined above. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I understand that this authorization will remain in effect until the seasons' end, and I agree to notify the business in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. This payment authorization is for the type of bill indicated above. I certify that I am an authorized user of this credit card and that I will not dispute the scheduled payments with my credit card company provided the transactions correspond to the terms indicated in this authorization form.

Card Number | ___|__| Exp. Date (mm/yy) ____/_

MONTHLY FEE charged on the 1st of each month **ALL FEES** charged on their scheduled due date

Please only use this card for delinquent payments.

ALITHORIZATION SIGNATURE	DATE



MANDATORY

Secondary Credit Card Auth. Form

No Athlete will be permitted to participate without this form on file

64B Marjorie Street – 120 Androvette Street Staten Island, NY 10309 (718) 966.4588

Schedule your payments to be automatically charged to your credit card. Just complete and sign this form to get started! Secondary credit card will be charged in the n that your primary card on file declines or is expired.

Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time)
- Your payment is always on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your Visa, MasterCard, Discover card or American Express to avoid late fees and hold a good financial standing on your account.

Late Payments:

Any payments not paid by the 10th of the month (based on the All Star Expense Sheet) will have this card charged for the amount due along with a \$15 late fee without notice.

authorize SI Spirit Inc. to charge my credit card indicated below for

INITIAL

(Cardholders full name)

Please complete the information below:

correspond to the terms indicated in this authorization form.

AUTHORIZATION SIGNATURE

(At	hletes full name)	for payment of my 2	2020-2021 All-Star Cheerleading Fees as indicated	
			oirit Inc. to charge this card for any payment h a \$15 late fee and no notice.	
Billing Addres	ss		_ Phone #	
City	State	Zip	Email	
	VISA MASTERCAR			
Card Number			Exp. Date (mm/yy) _	/
CVV (3 digit r		_	or delinquent payments as a secondary form.	
noted payment of authorization will termination of th	dates fall on a weekend or holidall Il remain in effect until the seas iis authorization at least 15 days	ay, I understand that the ons' end, and I agree to reprior to the next billing d	d on this authorization form according to the terms outlined above. If the payments may be executed on the next business day. I understand the notify the business in writing of any changes in my account information late. This payment authorization is for the type of bill indicated above. If the scheduled payments with my credit card company provided the tra	at this or I certify

DATE _____

Contract Agreement

- All SI SPIRIT logos and names are protected by copyright laws. DO NOT duplicate our logo, colors with team names, or any
 other type clothing. Anyone that attempts to sell or give away items with SI Spirit logos or likeness will be in violation of
 our policy. Included but no limited to, Air brush, printed and/ or bling clothing.
- I understand this is a financial commitment and all fees must be paid by there due dates. I understand that if I quit or I am removed from the program, I will not be entitled to a refund and/or am still responsible for paying outstanding fees of any kind. This includes all monies paid to SI Spirit Inc. including prepaid expenses such as competition fees, practice clothing, uniform, tuition, registration etc.
- I understand if the season is cut short, events are missed or cancelled for ANY reason I am not entitled to a refund.
- · SI Spirit has right to add or remove events at any time.
- SI Spirit reserves the right to update and change pricing at any time.
- I understand that to ensure the proper training, progression and safety of our athletes, NO ATHLETE is allowed to participate in other gyms Classes, Private Lessons, Open Gyms etc. If an athlete is found attending other gyms, they will be subject to dismissal from the program.



- I understand that if my child cannot attend any choreography, clinics, or camps, competitions etc. they WILL NOT be allowed to participate in SI Spirit's All-Star program for this season.
- I understand that the current season can turn into a training year without competitions.
- I will not be involved in any matter of disrespect towards any members of SI Spirit Staff, Parents or Cheerleaders. Negative behavior from a parent or athlete are grounds for removal of the program.
- I understand that good sportsmanship must be conducted at all times, by both parents and cheerleaders.
- No gossip about any other team or member will be tolerated by any parents and/or cheerleaders.
- I will not participate in any negative gossip or communications that adversely affect SI Spirit. This includes but is not limited to: Facebook, Twitter, Tik Tok, SnapChat, Instagram or any other websites.
- I understand that the coaches reserve the right to suspend any athletes or parents participation in activities at SI Spirit or SI Spirit's functions as disciplinary actions.
- I understand the importance of punctuality and will arrive to all scheduled events and practices on time and that all practices are MANDATORY. I understand I (athlete) MUST be in correct practice clothing including practice bow and sneakers.
- I understand the Team Parent Policy discussed in the parent meetings and I will RESPECT the Team parent and their role given.
- I understand that all competitions are mandatory.
- I understand that all athletes at SI Spirit are expected to arrive at practices and competitions on time with a positive attitude, and give their best effort in every endeavor.
- I understand that all tuition fees and other expenses are to be handed in on time, failure to do so will result in a late fee and the credit card on file will be charged. I understand that SI SPIRIT INC reserves the right to adjust, change or add fees if needed. I understand this is a 12 MONTH commitment for competition teams.
- I understand some teams are required to travel and all participants are expected to attend all competitions including The Summit and all other travel events scheduled. SI SPIRIT INC reserves the rite to adjust or make changes to their event schedule at any time.
- Any one threatening to quit or pull their child from a team will be asked to leave the program.
- I understand that no parents, guardians or spectators are permitted in the practice area at any time unless invited by a staff member.
- Each athlete must assume a role that is best suited for their team. It is important that everyone accept his/her role and position on the team in which they are placed.
- · Practices may be changed or added throughout the season. It is the responsibility of the child to bring home any paperwork or messages provided.
- I will not post any SI Spirit music, choreography, routines, stunts etc. on any website.
- I understand that this is a competitive team and I must be 100% committed, 100% of the time.
- I understand that If a competition has a Stay To Play Policy, ALL room reservations MUST be made through the housing company designated by the competition producer. Teams and/or individuals that do not abide by this policy will be ineligible to participate.
- Signing this binding contract with SI SPIRIT INC., you are acknowledging that in the event that the season cannot proceed for any reason, you will be releasing all monies collected to SI SPIRIT INC. All monies and fees paid to SI SPIRIT INC. are non-refundable and non-transferable. These fees include and are not limited to registration fees, tuition, competition fees, uniforms, etc. Under any circumstances no refunds will be issued.
- SI Spirit reserves the right to merge and change teams at any point.

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INITIAL

I have read EVERY page of the SI Spirit All Star Packet in its entirety and agree to abide by all rules and regulations. I also understand that failure to do so may result in dismissal from the program.

Athlete Full Name (Printed):	Athlete Signature:	Date:
Parent Full Name (Printed):	Parent Signature:	Date:

Contact Form

Please provide the contact information for both parent and child that can be used by staff to inform you about important updates and information throughout the season.

PLEASE PRINT CLEARLY

Athlete Full Name:	Team	1:
Athlete Email:		com
Athlete Cell Phone:		
Parent Full Name:		
Parent Email:		com
Parent Cell Phone:		
Parent Full Name:		
Parent Email:		com
Parent Cell Phone:		
Additional EMERGENCY Contact:		
Email:		com
Cell Phone:		
Relationship to athlete:		



Team Parent Volunteer Form

-THIS POSITION WILL BE CHOSEN AT RANDOM AND WILL BE GIVEN OUT DURING THE SECOND WEEK OF PRACTICES-

Team Parent Roles and Responsibilities

The team parent designated for each team will be responsible for the following: (Please note, roles may be added and taken away as we feel they are necessary. Not all roles will be mandatory for all teams. Details will be discussed after the team parent is chosen:

- Organizing Team bonding days. Examples: Pizza party, bowling, movie night, crafting, ect.
- Meeting the team on competition days to ensure all athletes are present, dressed and makeup is on and they use the restroom. Coaches competition schedules get overlapped at times so this will help get our teams in order for a calm and organized competition experience.
- -Organizing Fundraising days where each team will go canning to raise funds for the season.

Please initial below to acknowledge your understanding of the Team Parent Volunteer Role:

INITIAL	-		
director, or SI Spirit staff me from the position immediately when needed. Team parents out messages unless first	mber. Any team Pare v. All team parents m will not be allowed to given permission by	t that breaks this cod st resume a positive i hold meetings, fundra	sks given by the head coach, le of conduct will be removed role to help assist the coaches aisers, team bonding, or send rent MAY not engage in any ld.
INITIAL			
PARENT CONTACT INFO			
PRINT PARENT NAME:			
PRINT ATHLETE NAME:			
TEAM YOU ARE VOLUNTEERING	FOR:		
PARENT CELL PHONE:			
PARENT EMAIL :	@	com	
By signing	this form you are agre	ing to the terms of the t	eam parent
PARENT SIGNATURE	D	TE / /	



Important Information

As a staff, we have decided to come up with a way to help alleviate some cost for our families. We believe giving you the option on the brand of products gives you a variety of options and price ranges to shop on.

Sneakers this year are going to be purchased separately to help alleviate coast for families. We will open the option for families to purchase sneakers that best fit their athletes. Below are some recommended shoe brands that you can purchase. All athletes must purchase a WHITE pair, no other colors will be acceptable. If you are a returning athlete, there will be no need to purchase new sneakers if your current shoes are in an acceptable condition.

Rebel cheer shoes https://www.rebelathletic.com/all-shoes/performance-shoes.html

Nfinity cheer shoes https://www.nfinity.com

Varsity Spirit Fashion cheer shoes https://shop.varsity.com/collections/cheerleading-shoes

Practice wear this season that will be purchased is our "Spirit Strong" tank top, or crop top. The link to the "Spirit Strong" is linked below. Other than that, we will require a plain black sports bra and black shorts/leggings.

Website for "Spirit Strong" https://www.vaultbyasce.com/si-spirit

Make up will be the traditional blue, silver and white eye with red lips. Products you will need to purchase for this is;

- · Navy Blue eye shadow
- · White eye shadow
- Primer
- · Blush mascara
- · Lip stick stain color to be determined

USASF membership fee will no longer be paid to the gym anymore. As per USASF, the \$30 USASF membership fee will be paid for by the athletes directly through the USASF website. Upon commitment to SI SPIRIT INC., directions on how to register your athlete through USASF will be distributed.

Face Covering/Mask are required once we are in the gym. These can be ordered through instagram Direct Message.

Instagram handle: @pixel.perfect.gifts



Financial Commitment Form

- 1. All athletes and their families must be in good financial standing with SI SPIRIT INC. in order to be added to a roster for the 2020-2021 season.
 - 1. Including but not limited to outstanding balance of fees from previous seasons, private lessons, tumbling class, as well as any and all fees previously due to SI SPIRIT INC.
- 2. All fees will be due on the first of every month, or their given due date.
 - 1. Any fee not paid by the 10th of the month will incur a \$15 late fee for each month it is late.
 - 2. If fees are not paid to SI SPIRIT INC. by the 10th of the month, the card provided on file will be charged. Cards on filed that decline and are not paid by the 10th of the month will incur a \$15 late fee each month they are not paid, and thereafter.
 - 3. Any payments via check that are returned for insufficient funds will incur a \$30 processing fee.
- 3. When paying fees to SI SPIRIT INC. you are releasing the right of any and all monies to SI SPIRIT INC.
- 4. Any family with an account who is more than one month delinquent will not be allowed to participate until their account is in good standing. In the event this happens, it is possible that it may effect their initial positions on the mat.
- 5. Any and all fundraising monies applied to your All-Star accounts are non-refundable, non-transferable, and and will be applied to your account at the discretion of SI SPIRIT INC.
 - 1. Fundraising monies may not be transferred to a new season and must be completely used with-in the present season.
 - 2. Any fund raising opportunities such as but not limited to canning, bagging, or using the name of SI SPIRIT INC. MUST be asked for approval by Gym Owner/Directors.
- 6. Any past due account or account that is not in good standing with SI SPIRIT INC. will not receive any products, clothes, or services until accounts are paid in full and up to date.
- 7. Monthly fees pay for training. This fee does not pay for the right to perform.
- 8. Monthly fees will NOT be prorated for less hours participated during the month.
 - 1. For example but not limited to, vacations, absences, less hours of training, etc.
 - 2. In the event an athlete is sitting out of practice due to injury, illness, sitting out by coaches, etc. monthly fees, and all other fees for this season will still be due on their due date.
- 9. Students with an outstanding balance on their All-Star account will not be able to participate in any additional class/private lessons.
- 10. If an athlete chooses to leave, or is asked to leave SI SPIRIT INC. for any reason prior to the ending of their season, any and all fees including uniform, tuition, competition fees, etc. will automatically be forfeited and will not qualify for any form of refund, credit, or transfer of fees.
- 11. SI SPIRIT INC. reserves the right and will take legal action through a debt collector to turn over all unpaid fees due to SI SPIRIT INC.
- 12. In the event we are forced to close down for any reason including but not limited to Covid 19 or any other reason all monies paid to SI Spirit will be forfeited.

Athletes Name:	
Parent/Guardian Name:	
Parent/Guardian Signature: _	
Date:	

SI SPIRIT INC. EMERGENCY MEDICAL RELEASE & LIABILITY WAIVER

No child will be permitted to participate in ANY activity in this facility if this form is not completed and on file in our office.

If the	re are any changes to the information on this form, p	lease inform our office.				
ATHLETE NAME		BIRTH DATE				
TEAM						
STREET ADDRESS	CITY	ZIP C	CODE			
ATHLETE CELL PHONE ()	ATHLETE EMAIL					
ALLERGIES	OTHER MEDICAL CONDIT	IONS				
INSURANCE COMPANY	POLICY HOLDER NAME	POLICY #				
PARENT/ GUARDIAN CONTACT INFORMATION						
MOTHER'S NAME	HOME PHONE ()	CELL PHONE ()				
MOTHER'S EMAIL ADDRESS		@	COM			
FATHER'S NAME	HOME PHONE ()	CELL PHONE ()				
FATHER'S EMAIL ADDRESS		@	COM			
IN AN EMERGENCY WHEN A F	PARENT/GUARDIAN CANNOT BE REAC	HED PLEASE CONTACT THE FO	OLLOWING:			
NAME	HOME PHONE ()	CELL PHONE ()				
NAME	HOME PHONE ()	CELL PHONE ()				
conducted by/at SI Spirit Inc. I acknowledge a physical illness or injury (minimal, serious, ca assuming that risk or such illness or injury b necessary treatment for the minor and hereb premises the activity will occur, the affiliates employees of SI Spirit Inc., the hosting site understand that I will be responsible for any a sustain during the activities and while traveling	ceipt and sufficiency of which are hereby acknow minor (hereinafter "minor") hereby grant the permis and agree, in my own behalf and on behalf of the minor and/or death) and that I, in my own behalf are activities. In the event of surface, in my own behalf and behalf of the minor, released of SI Spirit Inc., the hosting site and their respectant their respective affiliates (hereinafter "released all medical and related bills that may be incurred to and from the site for the activity whether or not the first the second and related and held hereinaged to and from the site for the activity whether or not the first the second and related and held hereinaged to a site of the activity whether or not the site of the site of the activity whether or not the site of the	inor, that such participation subjects minor nalf and on behalf of the minor, acknowler uch illness and/or injury, I authorize SI Sp se and hold harmless SI Spirit Inc., the hative directors, officers, representatives, m s") in the exercise of this authority. I furth on behalf of the minor for any illness or injurt ne activity occurs.	to the possibilities of dge that the minor is birit Inc. to obtain the osting site on whose embers, agents, and her acknowledge and ury that the minor my			
judgment, loss, liability cost and expenses (inc arising out of or connected with any illness of traveling to and from the site for the activity of releasee's heirs, successors, assigns, execu- brought by minor or by any other person on	, further agree to release and to hold harmless releateding, without limitation, attorney fees and costs) are injury that the minor may incur or sustain during whether or not the activity actually occurs. I further clors, and administrations against loss from or any account of damages of any character resulting to milloss; damages or cost releasees may have to pay as	rising out of or connected with the activities the activities, anything associated with the expressly agree to indemnify and hold har further claims, demands or actions that make in any way from the foregoing activities.	s, including any claim, the activity and while mless releasees and may subsequently be			
I represent that any medication to which the minor is allergic or is currently taking are listed below. I agree that minor shall bring medication which minor is currently taking with him/her to the activity and that he/she shall consume the prescribed dosages. Medications (if any):						
behalf and on behalf of the minor am aware to knowing assumption of the risk of injury and/or	or, hereby warrant that I have read this release waith hat this release and waiver releases releasees from illness. I, in my own behalf of the minor, further acomb behalf and on the behalf of the minor, have signed.	n liability and contains an acknowledgment cknowledge that nothing in this release and	t of my voluntary and waiver constitutes a			
I further grant permission to SI Spirit Inc., advertisements to promote SI Spirit Inc., and a	to photograph or videotape my daughter/son duratifiliated companies.	ring all aforementioned activities for use	in publications and			
PARENT/ GUARDIAN SI	GNATURE:	D	ATE:			

OFFICE USE ONLY: REGISTER DATE _____ PAYMENT CASH CREDIT CHECK _____ INITIALS __



RELEASE OF LIABILITY FOR MINOR PARTICIPANTS READ BEFORE SIGNING

IN CONSIDERATION OF my child	being allowed to participate in any way in the SI SPIRIT
inc. related events and activities, the undersigned acknow	viedges, appreciates, and agrees that:
involved in these programs are significant, including the polygolder of the programs are significant, including the polygolder of the polygolder of the programs are significant, including the polygolder of the	NGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, THE RELEASES or others, and assume full responsibility for my child's seed and customary terms and conditions for participation. If I observe any or participation and/or in the program itself, I will remove my child from the official immediately; and, ny/our heirs, assigns, personal representatives and next of kin, HEREBY its directors, officiers, officials, agents, employees, volunteers, other sers, and if applicable, owners and lessors of premises used to conduct the ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person of pation in these programs, WHETHER ARISING FROM THE NEGLIGENCE est extent permitted by law. of my/our heirs, assigns, personal representatives and next of kin, HEREBY Releasees from any and all liabilities incident to my involvement or FROM THEIR NEGLIGENCE, to the fullest extent permitted by law. The following the risks of the activity, his/her responsibilities for hild/ward understands this agreement. EREAD THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK ERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY
SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY	
Name of Child/Ward:	
Name of Parent/Guardian:	
Parent/Guardian Signature:	
Date Signed:	
UNDERSTANDING OR RISK	
I understand the seriousness of the risks involved in partic regulation, and accept them as a participant.	cipating in this program, my personal responsibilities for adhering to rules and
Name of Child/Ward:	
Signature of Child/Ward:	

SI SPIRIT INC | 64B MARJORIE STREET, SI NY 10309 | (718) 966.4588 | SISPIRIT@AOL.COM

Date Signed: