

USA STARZ PREP

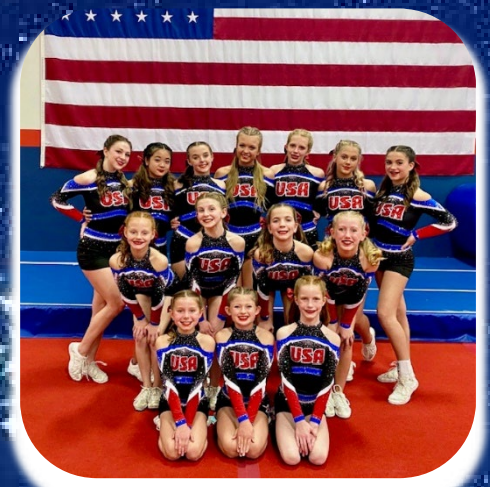
For Required Forms Visit:

**AUGUST
21ST**

1:00PM

**GILBERT
LOCATION**

For Required Forms Visit:
usagymnaz.com



 [@USASTarz](https://www.facebook.com/USASTarz)

 [:usastarzcheer](https://www.instagram.com/usastarzcheer)

 [@USASTARZ](https://twitter.com/USASTARZ)

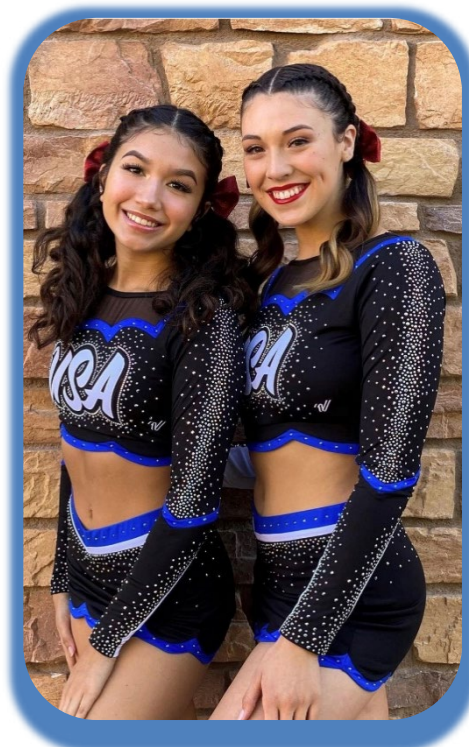
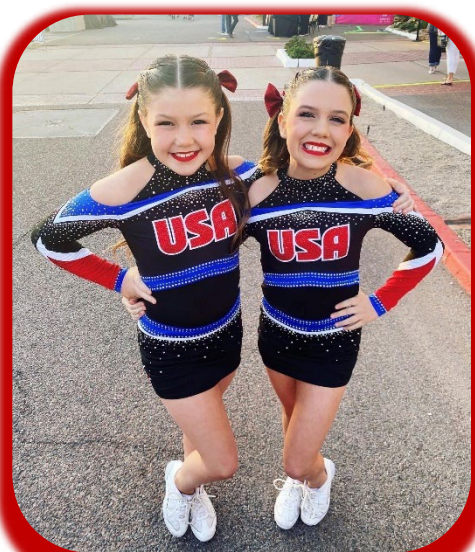
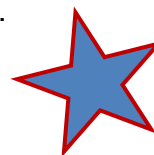
Welcome to the USA STARZ program!

USA is extremely proud of the program it has developed over the last 16 years. Although USA is one of the largest programs in Arizona, our gym feels like “home” to our staff, coaches, athletes and families. Our focus is the continued personal growth and skill progression of the individual athlete. Our goal is to create an environment where athletes learn the value of commitment, team work and time management.



Why are we so successful?

The USA cheer program is designed to build strength, flexibility and the technical skills to be successful in the sport. We believe every team member, of all ages, can be successful in our program. We offer the highest quality and most experienced cheerleading professionals in the state. Our USA cheer coaches are former college and All-Star cheer athletes that are USASF certified with years of coaching experience. USA is one of the largest gyms in Arizona with 3 locations and over 150 staff. USA Starz offers cheer teams ranging in age from Tiny (ages 5 – 6) to International Teams (ages 14 and up). We have programs for both All Star Cheer and Prep Teams at our Gilbert location and our new Queen Creek location. This past year we had 15 teams, over 80 participants in our Cheer Recreational program, and over 450 students in our tumbling classes.



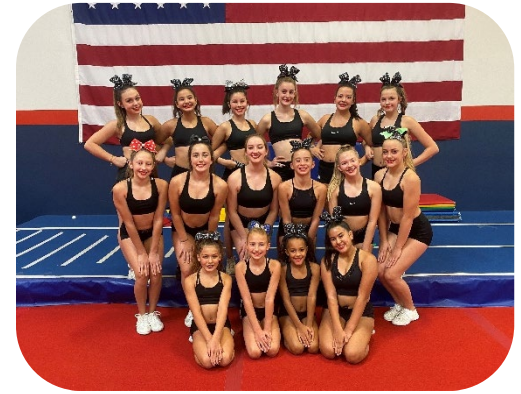
PREP CHEER

Join us for Team Placements:

We are excited for you to meet our coaches and visit our facility!

Placements for both Gilbert and Queen Creek teams will be held on the dates and times below. Call backs for World's teams and flyer evaluations will be Saturday, August 21st at 1:00pm at the Gilbert location.

- ☐ Copy of Birth Certificate and ID (unless currently a Starz Team Member)
- ☐ Application and Release Forms
- ☐ Completed Membership Form (see page 8 in this packet)
- ☐ Clinic / Tryout fee: **\$20** for new members / **\$10** for returning team members
- ☐ New members must attach a school picture / or other picture to their application.



What to Wear: Wear all black sports bra/tank top with black shorts. Hair should be up in a high ponytail with a bow.

How to Register: Go to our website at usagymaz.com/competitive_teams/starz-cheer to download a placement packet and to register for clinics and placements.

**** ALL FEES paid for any of the above listed expenses are non-refundable, including choreography camp, uniform, practice clothes and competition fees. If a team member does not complete the season after joining the team, these fees will not be refunded.**



*Friends Family
Teammates for Life*

PREP CHEER TEAMS:

Prep Cheer Teams hold placements in August for the 2021-2022 Season. The teams from last season continue to practice in classes during the summer months to prepare for placements in August. The All-Star program and the Prep program are similar, but Prep Teams have smaller cost and time commitment expectations. All-Star Cheer attends 7 to 8 competitions a season, while Prep Teams attend between 4 and 5 competitions each season. All competitions attended by the Prep Teams are held in the Phoenix area; there is no traveling involved. Prep Teams practice with their team two times per week. They are encouraged to enroll in a tumbling class, but it is not a requirement.

An **estimate** of the team costs, in addition to monthly tuition, is:

Uniform:	\$215
Bow:	\$30
Practice Uniform:	\$125
Shoes:	\$90
(using the last pass to order online)	
Choreography Camp:	\$225
Music:	\$125
Competition Fees:	\$450 + \$50 to the parent group
USASF athlete registration fee:	\$30
TUITION:	\$165 monthly



Gym Information:

USA offers several youth sports and competitive teams outside of All-Star Cheer to family members. Siblings receive 20% off tuition, and the discounts continue based on the number of children enrolled. All Starz team members receive 50% off all tumbling classes. USA offers over 70 tumbling classes weekly between all three gyms. Starz team members also receive 50% off dance classes and flyer technique / stretching classes. Once your athlete becomes a member of the gym, you will receive information on open gyms, camps, special events, and other important information through our monthly newsletter, emails and website updates.

Referrals: The best advertising USA Starz has is referrals from our current parents and athletes. We offer a generous referral program. **Each team member referral receives one month of FREE tuition!**

Our motto is: *Friends, teammates, family...for life.*

We believe that teammates that are friends will compete well together. While competing and winning IS a fun aspect of being in our program, we also know that developing true friendships and being in an encouraging, positive environment is important too! That is what makes our program so successful; we are a family who supports one another, the teams and the coaches.

The foundation for our gym is *Believe, Achieve and Succeed.*



GILBERT LOCATION:

1530 S. Gilbert Rd.
Gilbert, AZ 85296

(480) 926-1480



QC LOCATION:

24648 S. Ellsworth Rd.
Queen Creek, AZ 85142

(480) 783-2546

USA
YOUTH FITNESS CENTER
GILBERT
Membership Form

Student #1 Name:	Birthdate:	Circle: M F	Program/Level	Day/Time
Student #2 Name:	Birthdate:	Circle: M F	Program/Level	Day/Time
Student #3 Name:	Birthdate:	Circle: M F	Program/Level	Day/Time

CONTACT INFORMATION

Father: _____ Home () _____ - _____ Work () _____ - _____ Cell () _____ - _____
 Mother: _____ Home () _____ - _____ Work () _____ - _____ Cell () _____ - _____
 Address: _____ City: _____ State: _____ Zip _____
 Email Address: _____ @ _____ (Required)

HOW DID YOU HEAR ABOUT US?

- ☐ Active Mom's Magazine
 ☐ Birthday Party
 ☐ Drive-by
 ☐ Exhibition
 ☐ Facebook
☐ Kid's & Sports Magazine
 ☐ School
 ☐ USA Website

-OR- Referred By: _____

EMERGENCY INFORMATION

In the event of an emergency and a parent/guardian cannot be reached, please call:

Name: _____	Phone: () _____ - _____
Doctor's Name: _____	Phone: () _____ - _____
Insurance Company: _____	Phone: () _____ - _____

PERMISSION TO TREAT

I give permission to medical professionals to administer emergency treatment to my child should an accident occur in my absence.

PARENT/GUARDIAN SIGNATURE

DATE

MEDICAL BRIEF

Check ALL applicable conditions and explain.

If you have more than one child enrolled, please specify which child has the condition on the line provided.

- | | |
|---|---|
| <input type="checkbox"/> Allergies(General) _____
<input type="checkbox"/> Allergy to Bee Sting _____
<input type="checkbox"/> Allergy to Any Food _____
<input type="checkbox"/> Allergy to Latex _____
<input type="checkbox"/> Allergy to Medication _____
<input type="checkbox"/> Hay Fever _____ | <input type="checkbox"/> Respiratory Problems _____
<input type="checkbox"/> Asthma _____
<input type="checkbox"/> Sinus Trouble _____
<input type="checkbox"/> Vomiting _____
<input type="checkbox"/> Headache _____
<input type="checkbox"/> Diabetes (Type I or II?) _____ |
|---|---|

Please Explain: _____

Is Your Child on any special medication(s)? YES NO

Describe _____

Other Medical Conditions or previous injuries?

Athlete Questionnaire/Application

USA Starz 2021 - 2022 Season

Name: _____

Age (Current) _____ Birthdate: _____ / _____ / _____

Parent(s) Name: _____

Parent Email: _____

Phone number: _____

Parent Cell Phone: _____

Previous cheer experience: _____

Last gym / team name and level in which athlete completed: _____

***Flyers:** Check boxes below if you currently have the skill. Flyers will be asked to demonstrate skills on floor during Placements.

<input type="checkbox"/> Left heel stretch	<input type="checkbox"/> Double twist basket	<input type="checkbox"/> Left bow-n-arrow
<input type="checkbox"/> Kick single basket	<input type="checkbox"/> Left scorpion	<input type="checkbox"/> Kick double basket
<input type="checkbox"/> Left arabesque	<input type="checkbox"/> Hitch kick double	<input type="checkbox"/> Left scale
<input type="checkbox"/> Kick/Kick double	<input type="checkbox"/> Single twist from 2 leg stunt	<input type="checkbox"/> Double down from 1 leg
<input type="checkbox"/> Double down from 2 leg stunt	<input type="checkbox"/> Double up	

Flying positions are competitive and all flyers are placed based on skill, technique, experience, flexibility and body control. No flying positions are guaranteed.

Tumbling. Please check the boxes below if can demonstrate skill on the floor without a spot.

<input type="checkbox"/> Back Walkover	<input type="checkbox"/> Running Back Handspring	<input type="checkbox"/> Standing Back Handspring
<input type="checkbox"/> Running Back Tuck	<input type="checkbox"/> Standing Tuck	<input type="checkbox"/> Running Layout
<input type="checkbox"/> Jump to Tuck	<input type="checkbox"/> Running Full	<input type="checkbox"/> Standing Multiple BHS
<input type="checkbox"/> Running Double Full	<input type="checkbox"/> Standing Two BHS to tuck	<input type="checkbox"/> Standing BHS to Layout
<input type="checkbox"/> Standing Two BHS to Full	<input type="checkbox"/> Standing Full	

List your hardest Combo pass: _____

List any Specialty Skills: _____

If we need your position on another team, are you willing to cross over? _____

IF you are not currently a member of USA Starz, please attach a copy of the birth certificate AND a student or state ID. Proof of age verification is required for each athlete for all USASF events.

Practice Location Preference:

☐ GILBERT

☐ QUEEN CREEK

☐ EITHER LOCATION

USA STARZ Parent / Athlete Waiver

This form must be completed to attend Team Placements.

I (athlete name) _____ agree to follow all USA Starz and USA Youth Fitness Center rules and guidelines. I understand the level of commitment asked and understand the attendance rules and requirements. I will respect my coaches and fellow athletes at all times. I understand that cheerleading is a team sport and my actions effect the entire team. I will adhere to the USASF rules and requirements and as a USASF athlete member, agree to the membership requirements for the USA Starz. I understand that if I choose to leave/quit at all during the season, the director and owner must release me by signing the USASF member release form before I can attend another gym/team. I understand the gym may not release me during the season to attend another gym.

I fully understand that all fees paid to the gym for my participation in the sport are non-refundable. I fully understand that fees for choreography, camp, uniform, practice clothes and competition fees will not be refunded even if I leave the team before I have participated in the activity or competed for the team. I fully understand that the uniform is the property of the gym and team members only. If I choose to leave the team before I have received the uniform it cannot not be given to me if I am no longer a team member.

I also understand that the fees will be collected at the time of tuition in the month identified. I give my permission for the fees to be collected on the form of payment I have provided to the gym to secure the membership on the team.

Athlete Signature: _____

Date: _____

Parent Signature: _____

I (parent name) _____ agree to follow all rules and guidelines for the 2021-2022 season. I will also follow the rules placed through USASF and USA Youth Fitness Center. I understand the level of commitment this sport requires and support my athlete. I agree to the fiscal responsibilities placed by USA Youth Fitness Center. I understand that all fees paid are non-refundable. My role as a parent is to support my athlete as well as the USA Starz coaching staff.

Parent Signature: _____

Date: _____

LIABILITY WAIVER (Minor, under 18)

BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN

LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

I am aware that in addition to the usual dangers and risks inherent in the sport of Gymnastics, Cheerleading, Dance, Trampoline, Tumbling, and other USA Youth Fitness Center activities, certain additional dangers and risks are present when using USA Youth Fitness Center Facilities, Gymnastics Equipment and Trampoline, including, but not limited to, the danger and risk of falling, jumping, landing, height and motion. By signing this waiver, I freely accept and fully assume responsibility for all such dangers and risks and the possibility of personal injury, death, property damage or loss resulting therefrom.

In consideration of utilizing the USA Youth Fitness Center Facilities Gymnastics Equipment and Trampolines and for other good and valuable consideration, I hereby agree as follows:

- 1. TO WAIVE ANY AND ALL CLAIMS** for personal injury including death, illness, and/or property damage that my child may have against USA Youth Fitness Center, their principals, directors, sponsors, affiliates, employees, representatives and any volunteers in any way associated with USA Youth Fitness Center, all of whom are hereinafter collectively referred to as "the Releasees".
- 2. TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY** for any loss, damage, injury, death, medical or other expense that my child may suffer or that any other party may suffer as a result of my use of USA Youth Fitness Center Facilities Gymnastics Equipment and Trampolines or in my child's participation in the sports of Gymnastics, Trampoline, Tumbling, Cheerleading, Dance or other USA Youth Fitness Center activities.
- 3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES** from any and all liability for any property damage or personal injury to any third party, resulting from my use of USA Youth Fitness Center Facilities Gymnastics Equipment and Trampolines or by my child's participation in the sports of Gymnastics, Trampoline, Tumbling, Cheerleading, Dance or other USA Youth Fitness Center activities.
- 4. THIS RELEASE OF LIABILITY SHALL BE EFFECTIVE AND BINDING** upon my heirs, next of kin, executors, administrators, successors, and assigns in the event of my child's personal injury including death, illness, and/or property damage.
- 5. I ADDITIONALLY AGREE** that my child shall follow correct safety procedures when using USA Youth Fitness Center Facilities Gymnastics Equipment and Trampolines. I also expressly grant to USA Youth Fitness Center, and any third party authorized by them, the right to film, videotape, photograph, record my child's voice, may be printed, used or incorporated, and in the advertising of the Facility, Facility products, licensed products, and all affiliated relationships.

I HEREBY CERTIFY THAT my child is covered by his/her own Medical Insurance, and that I have read and understand this Release of Liability prior to signing it, and I am aware that by signing this Release of Liability I am waiving certain legal rights which I, my child, or our heirs, next of kin, executors, administrators, successors, and assigns may have against the Releasees.

USA Youth Fitness Center shall have the right to impose any additional conditions which, in the opinion of the Releasees, will further the intent and legal rights and waivers provided herein.

This Liability Waiver was made and executed in the State of Arizona and shall be governed by, enforced in and construed in accordance with the laws of the State of Arizona.

I acknowledge that in executing this Waiver, I am not relying on any inducements, promises, or representations made by the Releasees.

I am acting on behalf of the student's other parent in signing this contract and I have authority to bind such other parent to the terms and conditions of this contract on his or her behalf.

Parent/Legal Guardian Signature

Print Name Here

Date



USA STARZ REFERRAL PROGRAM 2021-2022

USA Starz All Star and Prep

USA is pleased to present the following referral program to all of our current USA Starz team members in the 2021-2022 program! We sincerely appreciate knowing that you believe in our program enough to refer it to someone else.

As our way of thanking you for your referral to USA Starz, we are offering the following incentive:

1 MONTH OF FREE TUITION FOR EACH QUALIFYING REFERRAL!

The following guidelines apply:

Qualifying Referral: A participant is considered to have joined the team as a referral the first month after they have paid a full month's tuition to the program.

Both the referring team member and the new team member must sign the referral form the first week the team member joins the program. (within 7 days of registering)

The participant cannot be a sibling of the current team member. There is no limit to the number of referrals a current team member can receive.

USA STARZ Referral:

Referred by Name: _____ (the team member name of the person that recommended USA Starz Cheer)

New Member's Name: _____

Date New Member Joined: _____

Signatures:

(Referred by Signature and Date)

(New Member Signature / Date)



PRELIMINARY

2021-2022 PREP COMPETITION SCHEDULE

Nov 6	Starz Showcase	Gilbert or Queen Creek Gym	All teams
Jan 22	Clash of the Titans	Convention Center P	Prep
Feb 13	USA Championships	Phoenix	Prep
Mar 5	Aloha	Phoenix Convention Center	Prep
Mar 26	Cheersport	AZ State Fair	Prep

Sample Only

