

# Xtreme All-stars

Team Handbook 2009-10



Congratulations and welcome to the new **XTREME ALL-STARS!**

We are so excited about the upcoming season. In this handbook you will find many of the answers to your questions regarding our team program. If you have any questions after reading this, please call Mike at (203) 273-9161 or Dana at (860) 919-2974.

Xtreme requires a commitment from both the cheerleaders and parents. We have scheduled practices times according to the time required to excel in this sport. We have scheduled parent meetings to excel our program. Please try to attend.

**Important notice:** Attached, as the last page of this handbook is the Medical Form. This form must be filled out completely by the parents, detached and returned to Mike or Dana. If this form is not properly signed, the All-star will not be allowed to practice until this form is returned. Thank you for your cooperation.

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## ***OUR MISSION AND BASIC PHILOSOPHY***

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**Our goal is to develop healthy, happy, responsible children by focusing on helping to:**

- **Increase self-esteem**
- **Master and refine skills**
- **Learn to work as a team**
- **Learn to trust themselves and others**
- **Most importantly, HAVE FUN!**

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## **PRACTICE**

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1. Parents are not allowed in the gym for any practice.
2. All-stars must attend all scheduled practices.
3. More than 3 practices missed during competition season may result in being asked to leave the team. Excused absences include illness, injury, or religious events. The rest are up to the discretion of Mike and Dana. If your child is unable to attend, please call Mike or Dana at least 24 hours before practice or it will be deemed UNEXCUSED.
4. All-stars more than 5 minutes late will condition/run unless called ahead of time.
5. Our season runs until the 1<sup>st</sup> week of May. We may extend it.

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### **PRACTICE TIMES FOR THE SEASON (Sep – May)**

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#### **Summer 2010**

	<b>Sundays</b>	<b>Mondays</b>	<b>Wednesdays</b>
<b>Junior 2:</b>	12:00 – 1:30 pm	6:00 – 7:30 pm	
<b>Junior 3:</b>	1:30 – 3:00 pm		5:00 – 6:30 pm
<b>Co-Ed 3:</b>	3:00 – 4:30 pm		6:00 – 7:30 pm
<b>Senior 2:</b>	4:30 – 6:00 pm		7:00 – 8:30 pm

#### **Fall 2010**

	<b>Sundays</b>	<b>Mondays</b>	<b>Wednesdays</b>
<b>Junior 2:</b>	10:30 – 12:30 pm	5:00 – 6:30 pm	
<b>Junior 3:</b>	12:00 – 2:00 pm		5:00 – 6:30 pm
<b>Co-Ed 3:</b>	1:30 – 4:00 pm		6:00 – 7:30 pm
<b>Senior 2:</b>	3:30 – 6:00 pm		7:00 – 8:30 pm
<b>Open 6:</b>	6:00 – 8:00 pm		

**PLEASE NOTE:** Practice hours may change during competition season.  
We may add in an extra half hour or day once in a while at no additional cost.

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## **GENERAL INFORMATION**

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1. If an All-star is injured outside cheerleading, they need to notify the coaches as soon as possible. If an All-star is injured during a practice or competition, they will be attended to by the coaches certified in CPR and First Aid and the parents will be contacted as soon as possible. If the parents are not available, the coaches will notify the necessary medical personnel. We will call 911 in the event of a major injury.
2. Any All-star who uses an inhaler or any other medications must carry it with them at all times, it is their responsibility. Also, no medications will be distributed to any All-star.
3. As coaches, we try to make ourselves accessible to parents as much as possible, however, please allow an appropriate time that will not interfere with your child's practice.
4. If your child becomes a behavioral problem, they will be asked to sit out of practice or you may be called to pick your child up. This includes lack of respect to coaches as well as other All-stars.
5. This team is a commitment for both the All-star and parent. In order to have a variety of activities, we need to have an active parents club.  
**WE ASK THAT ALL PARENTS GET INVOLVED IN THIS GROUP.**
6. Fundraising will take place throughout the season. We strongly encourage all to participate.

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## **PARENTS CODE**

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1. Do not force an unwilling child to participate in sports.
2. Remember, children are involved in organized sport for their own enjoyment, not yours.
3. Encourage your child to always play by the rules.
4. Teach your child that honest effort is as important as victory, so that the result of each competition is accepted without undue disappointment.
5. Turn defeat to victory by helping your child work towards skill improvement and good sportsmanship. Never ridicule or yell at your child for making a mistake or losing a competition.
6. Remember that children learn best by example. Applaud good efforts, individual, team, as well as the efforts of the opposing team.
7. Parents are not allowed in the gym during practice. It's disruptive and may lead to potential injury.

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## **TEAM TUITION**

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<b>Summer 2010</b>	
<b>Juniors:</b>	<b>\$95.00 Monthly</b>
<b>Senior/Coed:</b>	<b>\$95.00 Monthly</b>
<b>Crossover:</b>	<b>N/A</b>

<b>Fall 2010</b>	
<b>Juniors:</b>	<b>\$105.00 Monthly</b>
<b>Senior/Coed:</b>	<b>\$115.00 Monthly</b>
<b>Crossover:</b>	<b>\$140.00 Monthly</b>

TO BE PAID THE 1<sup>ST</sup> SUNDAY OF EVERY MONTH.

A **\$10.00 late fee** will apply to any payment received after the 15<sup>th</sup> of each month. NO EXCEPTIONS.

Please make checks payable to **Xtreme Cheer**.

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## **COMPETITION FEES**

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Broken up into 3 separate increments, each to be made payable BY SEPARATE CHECK to:  
**Xtreme All-Stars** Due Jul. 1st, Sep. 1st, and Nov. 1st.

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## **MEDICAL FORM**

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NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMERGENCY CONTACT (NOT PARENT): \_\_\_\_\_

**Please check any of the following that apply:**

- |  |   |
|--|---|
| <input type="checkbox"/> HEARING DISORDER  | <input type="checkbox"/> TEETH RETAINER   |
| <input type="checkbox"/> HEART CONDITION   | <input type="checkbox"/> ASTHMA           |
| <input type="checkbox"/> LEARNING DISORDER | <input type="checkbox"/> CONTACTS/GLASSES |
| <input type="checkbox"/> DIABETES          |   |

PRESCRIPTIONS or MEDICATIONS: \_\_\_\_\_

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**PLEASE READ CAREFULLY:**

ASSUMPTIONS OF RISK: I PERMIT MY CHILD OR WARD TO ENROLL AND PARTICIPATE AS A STUDENT AT XTREME CHEER. I HEREBY RELEASE AND HOLD HARMLESS XTREME CHEER, ITS EMPLOYEES, INSTRUCTORS, AGENTS, AND DIRECTORS FROM ALL CLAIMS, DEMANDS, LIABILITIES, HARM OR DAMAGE WHICH MAY RESULT TO MY CHILD OR WARD. I UNDERSTAND THAT ANY ACTIVITY WHICH INVOLVES MOTION, ROTATION, HEIGHT, AND INVERSION MAY RESULT IN SERIOUS ACCIDENTAL INJURY, INCLUDING PARALYSIS AND EVEN DEATH. I HAVE BEEN INFORMED OF AND ASSUME ALL RISKS ASSOCIATED WITH THE PARTICIPATION IN THIS SPORT INCLUDING, BUT NOT LIMITED TO FALLS, CONTACT WITH OTHER PARTICIPANTS AND OTHER REASONABLE RISK CONDITIONS ASSOCIATED WITH THIS SPORT. ALL SUCH RISKS TO MY CHILDREN ARE KNOWN AND UNDERSTOOD BY ME. I HAVE HEALTH INSURANCE COVERING MY CHILD.

WE HAVE READ AND FULLY UNDERSTAND THE POLICIES, PROCEDURES AND ASSUMPTION OF RISK. MY CHILD AND I AGREE TO ABIDE BY THE POLICIES STATED.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date