

Initial Start-up Fees as of: _____ DATE ENROLLED ___/___/___
First Month Prorate: _____ DATE OF FIRST CLASS ___/___/___
Registration: _____ REFERRED BY _____
T-Shirt: _____

Total: _____

CAROL BRUNO'S EXTREME CHEERNASTICS
INFORMATION & MEDICAL FORMS

Class day/Time _____ Child's D.O.B. ___/___/___

Students Name _____

First Middle Last

Address _____

City State Zip

Mom's Name _____ Home Phone _____

Place of Employment _____ Work Phone _____

Mom's Email _____ Cell Phone _____

Dad's Name _____ Home Phone _____

Place of Employment _____ Work Phone _____

Dad's Email _____ Cell Phone _____

Student's School _____ Phone Number _____

Family Doctor _____ Phone Number _____

If mom or dad cannot be reached please list who you would like us to call in case of emergency.

Name _____ Relationship _____ Contact # _____

Do you have medical insurance coverage? _____ Policy # _____

Company Name _____ Name on Policy _____

Medical History

Yes	No	
—	—	Medication
—	—	Allergies or Allergies to any medications
—	—	Asthma
—	—	Kidney or Bladder Problems (Circle one or both)
—	—	Epilepsy
—	—	Hearing or Vision Problems (Circle one or both)
—	—	Muscle, Tendon, or Ligament Problems
—	—	Previous broken bones or other injuries

If you answered yes to any of the above, please explain below:

Is there anything else we should know about the health of your child?

Has your child had any previous cheerleading, tumbling, or gymnastics experience? If YES, where and for how long?

CAROL BRUNO'S EXTREME CHEERNASTICS will do their best to see that your child has the best possible care during their classes. Cheerleading and tumbling include a risk of physical injury. Your child's safety is our primary concern, but the possibility of physical injury can never be eliminated. I give my permission for my child to be given all necessary medical treatments: including, but not limited to, transportation to a medical facility, sutures, setting of bones, injections and anesthesia that may be required during activities at or for Carol Bruno's Extreme Cheernastics.

Parent/Guardian _____ Date _____

**HOLD HARMLESS AGREEMENT
STATE OF LOUISIANA
PARISH OF TERREBONNE**

The following contract agreement has been made and entered into this _____ day of _____, _____, by and between CAROL BRUNO, owner of the business Carol Bruno's Extreme Cheernastics, located in Terrebonne Parish, and _____, in his/her own right and on behalf of his/her minor child, _____.

It is contracted and agreed that _____ in his/her own right and on behalf of his/her own minor child, _____ agrees to hold harmless Carol Bruno and/ or Carol Bruno's Extreme Cheernastics, from and against any and all claims, causes of action, demands and expenses arising out of or in any way connected with injury to any person or property of any person occurring in or upon the premises of CAROL BRUNO'S EXTREME CHEER-NASTICS and/ or any other premises which this cheerleading/ tumbling school may require the student to attend, including but not limited to an injury or accident arising from or during cheerleading/ tumbling lessons or instruction whether as the result of negligence or strict liability.

It is further contracted and agreed that Carol Bruno shall not be responsible for any accidents or injuries occurring on the premises or in the areas adjacent thereto whether as result of negligence or strict liability.

Carol Bruno

Date

_____, IN HIS/HER OWN RIGHT AND ON BEHALF OF

Date

Witness

Date

FEE SCHEDULE AND POLICIES

- Registration is \$40.00 for pre-existing and new students.
- Registration forms must be complete & signed before your child can attend.
- One class per week (Regular Class) is \$70.00 per month.
- One class per week (Tiny Tumble, Ages 3-5) is \$60.00 per month
- Two classes per week is \$140.00 per month.
- Private lessons start at \$35.00 per half hour.
- Class Attire: CBC T-shirt must be worn. Only bare feet or smooth bottom tennis shoes are allowed on the cheer mat.
- Payment is due on the first of each month. Payment received after the fifth of each month will be assessed a \$10.00 late fee. Failure to pay tuition after the second class of the month will result in the student not being able to participate in the third class of the month. Payment not received by the end of the third class of the month will result in the student losing their spot.
- Payments Returned "NSF" will be charged a \$35.00 fee.
- Cheernastics will recognize the major Holidays observed by the Terrebonne Parish & Lafourche Parish School Board.
- There are NO "MAKE-UP" classes or refunds if classes are misses for any reason.
- NO FOOD OR DRINKS allowed inside the GYM.
- Parents, Etc.; must remain in the waiting area at all times.
- Failure to give two weeks' notice in writing before dropping out will result in a \$35.00 Cancellation Fee.

CLASS SCHEDULE

MONDAY CLASSES

4:30 – 5:30 BEGINNER / INTERMEDIATE TUMBLE
5:30 – 6:30 BEGINNER / INTERMEDIATE TUMBLE
6:30 – 7:30 INTERMEDIATE / ADVANCED TUMBLE

TUESDAY CLASSES

4:00 – 5:00 BEGINNER / INTERMEDIATE TUMBLE
5:00 – 6:00 BEGINNER / INTERMEDIATE TUMBLE
5:30 – 6:30 TINY TUMBLE
6:00 – 7:00 ADVANCED TUMBLE

WEDNESDAY CLASSES

4:30 – 5:30 INTERMEDIATE / ADVANCED TUMBLE
5:30 – 6:30 BEGINNER / INTERMEDIATE / ADVANCED TUMBLE
6:30 – 7:30 BEGINNER / INTERMEDIATE / ADVANCED TUMBLE

THURSDAY CLASSES

4:00 – 5:00 ADVANCED TUMBLE

BEGINNER – SKILL LEVEL 1 (BACKBEND, CARTWHEEL, ROUND OFF, BACK/FRONT WALKOVER, ETC.)
INTERMEDIATE – SKILL LEVEL 2 (BACK HANDSPRING, RUNNING BACK HANDSPRING, ETC.)
ADVANCED – SKILL LEVEL 3 & ABOVE (TUCKS, LAYOUTS, ETC.)

- **Sign up for important reminders from Carol Bruno's Extreme Cheernastics with the REMIN App.**
 - If you have a smartphone, get push notifications.
 - On your iPhone or Android phone, open your web browser and go to the following link:
 - (Please be sure to type in the link that corresponds with your specific class. Also, make sure you enroll in the ALL TUMBLE CLASS REMINDERS class as well as your specific class.)
 - rmd.at/cbrunomon – for Monday Class Reminders
 - rmd.at/cbrunotues – for Tuesday Class Reminders
 - rmd.at/cbrunowed – for Wednesday Class Reminders
 - rmd.ar/cbrunothur – for Thursday Class Reminders
 - rmd.at/cbrunotum – for All Tumble Class Reminders
 - Follow the instructions to sign up to Remind. You'll be prompted to download the mobile app.
- If you do not have a smartphone, get the text notifications.
- Text the message @cbruno_ (be sure to enter the code that corresponds with your specific class) to the number 81010.
 - Class Codes are as follows:
 - **@cbrunomon** – for Monday Class Reminders
 - **@cbrunotues** – for Tuesday Class Reminders
 - **@cbrunowed** – for Wednesday Class Reminders
 - **@cbrunothur** – for Thursday Class Reminders
 - **@cbrunotum** – for All Tumble Class Reminders
- If you're having trouble with 81010, try texting your class code to (317)667-1711.

PLEASE BE PROMPT WHEN PICKING UP YOUR CHEERLEADER. THE OWNER CANNOT BE RESPONSIBLE FOR YOUR CHILD AFTER CLASS HOURS. CAROL BRUNO'S EXTREME CHEERNASTICS RESERVES THE RIGHT TO CHARGE A \$10 FEE SHOULD A CHILD NOT BE PICKED UP ON TIME! IF YOU HAVE ANY QUESTIONS REGARDING THIS PACKET OR NEED ANY ADDITIONAL INFORMATION, PLEASE FEEL FREE TO CALL OR EMAIL US.

Carol Bruno's Extreme Cheernastics
243 Capital Blvd
Houma, La 70360
(985)872-0339
www.cbcextremecheernastics.com

SIGNATURE _____ DATE _____

Child's Name/Class Day & Time: _____

Carol Bruno's Extreme Cheernastics

243 Capitol Blvd
Houma, LA 70360
(985)872-0339

CREDIT CARD (please check one) VISA MASTER CARD DISCOVER

ACCOUNT NUMBER: _____

EXP DATE: ____ / ____ 3 DIGIT SECURITY NO: _____

- I authorize Carol Bruno's Extreme Cheernastics to draft the bank account listed above between the 1st and 5th of each month in the amount due each month. I also understand there is a processing fee for each transaction.
(\$0 - \$175 : \$5.00 Fee / \$176 - \$300 : \$10.00 Fee / \$301 - \$500 : \$15.00 Fee)

CARD HOLDER NAME: _____

(Exactly as printed on card)

BILLING ADDRESS: _____

PHONE: (____) _____ - _____ FAX: (____) _____ - _____

EMAIL: _____

I understand the importance of the details provided in account information and give permission to Carol Bruno's Extreme Cheernastics, as this may be used to process withdrawal requests made by me unless payment has not been received by due date to Carol Bruno's Extreme Cheernastics.

I do agree to the processing fee added to each transaction.

I hereby represent that the information provided above is true and correct. False information may result in legal action and is punishable by law.

SIGNATURE: _____

DATE: _____