

## MINI PROGRAM

Welcome to **Zodiacs Athletics** home of the **Zodiacs Extreme All Stars!!** Thank you for choosing Zodiacs Extreme as your premier all-star cheerleading program. We are embarking upon our 5th competitive season, and we are extremely excited. ZEA has become one of the top cheerleading training centers around. Our program has won many National and Regional titles, and we know we will continue our success this upcoming season. Hard work, perseverance, positive reinforcement and the dedicated families involved with our gym make Zodiacs a truly unique place to enjoy the sport of all-star cheerleading.

Our gym strives to create competitive athletes that are not only superb on the competition floor but also upstanding individuals in everyday life. We create leaders and build self-confidence in every single one of our athletes. We hope that when the time comes for our athletes to graduate and move into a new phase of life , they take with them the integrity, character, work ethic, and self confidence they have gained by being a part of the Zodiacs Extreme Family.

In this packet you will find all information necessary to become a competitive all-star cheerleader for Zodiacs Extreme. You will see sections on tryout dates, financial obligations and other very important information. Please read through each section very carefully, and if you have any questions feel free to contact us.

Sincerely,

Shannon, Stacy & Jeff



## 2018-2019 Evaluation Information

Please pre-register for tryouts by sending Athlete name & age to <u>zodiacsextremeallstars@gmail.com</u> or texting <u>862-268-2099</u> or calling 973-409-4119.

Registration form (attached) must be completed prior to the start of the first try-out session along with paid evaluation fee. (\$25) If an athlete is unable to make a try-out session, prior arrangements must be made with the staff for a private tryout session. Each session will consist of tumbling, stunting, strength and flexibility conditioning. Athletes are expected to wear proper cheer attire. (athletic shorts, tank top or t-shirt, cheer sneakers and hair neatly pulled back)

\*Evaluation Fee \$25 cash or check made payable to Zodiacs

• Tuesday May 15th & Thursday May 17th

12 & Under- 6:00-7:30pm

Saturday May 19th

12 & Under- 9:00-11:00am

\*Try-out sessions will be closed to all spectators including parents. No exceptions. Thank you for your cooperation. Once team selection concludes, invitations will be sent out via E-mail no later than Wednesday May 23rd. Please make sure we have a valid email address on file for each athlete.

# **Team ACCEPTANCE/REGISTRATION-**

To secure your position on team a parent/athlete must attend one of the registration events to receive all necessary information for upcoming season. Team acceptance/registration dates/times/information will be included in the athlete evaluations email. There is a one time annual registration and USASF insurance fee of \$125 that will be due at that time. We will handle all USASF renewals this season.

## **Tuition Schedule & Fees:**

All tuition and fees for the season are included in this informational packet.

## **Summer Session:**

Classes will run every **Tuesday** & **Thursday** during the weeks listed below. Athletes are expected to attend all sessions. However, we understand this is a time where vacationing takes place so prior notice must be given to staff if and when child will be unable to attend. Individual and team goals will be set and met throughout our summer session so it is important to keep your commitment to our teams throughout this time. The Tuesday and Thursday classes will consist of tumbling, stunting, flexibility and conditioning workshops to prepare us for the beginning of our season.

Weeks of: 6/4 6/11, 6/18, 7/9, 7/16, 7/23,

\*\*(please note the gym will be closed the week of 6/25 & 7/2)

Time: Tuesday & Thursday 1 hr sessions. Exact times will be handed out during team registration/acceptance event.

Price: \$180 for 6 week program-cash or check made payable to Zodiacs. Summer session payment is due by 6/5/18 (first practice date)

\*No pro-rates or refunds for this session. If an athlete is unable to attend they forfeit the class fee.

# **Choreography Clinics/Stunt Clinics**

Choreography Camp/Stunt Clinics are **MANDATORY**. All athletes must attend. During this week, teams will be taught the competition routines.

Choreography/Stunt Clinics will run weeks of 7/30-8/3 & 8/6-8/10.

Price: \$160 per athlete due by 7/10/18

## \*Jump technique & Flyer flexibility and strength training Sessions\*

For summer schedule, this is an **optional** class. The classes will run the same weeks as the Summer Session. The drop in rate is \$10 per class/ athlete or you can PIF for all 6 classes at a discounted rate of \$50. Although not mandatory, it is very important for athletes to continue to improve jump technique and flyers continue to improve flexibility, strength.

- Jump TECHNIQUE-Wednesdays-6:00-645pm
- Flyer FLEX/STRENGTH-Wednesdays- 7:00-7:45pm

\*Please note ALL Flyers will be expected to participate in Flyer FLEX/ STRENGTH classes throughout competitive season.

## Fall Schedule: (September-May)

Season Tuition includes all practices and a weekly team tumbling class. ALL practices are MANDATORY and closed to spectators. Athletes are also expected to attend tumbling class, it is beneficial for the team and athlete to continuously improve tumbling skills.

Tuition: \$1250 for the season\*\*

o Can be PIF-\$1250

o 2 payments -of \$625

o 10 month payment plan-\$125 monthly

O Practice: Athletes practice twice a week.

<u>Team Tumble</u>:-times will be distributed during registration event.

<u>Additional fees</u> include warm-up jacket \$75, practice attire \$75 est, sneakers \$70est. These will be collected throughout the summer. Uniform cost is \$150. We are using the same uniform that we designed last year, so if athlete has purchased this already you are not responsible for this charge.

#### **COMPETITION FEES/SCHEDULE**

Competition Season will run January-April/May. Dates will be released late August. Competition Fees. Athletes will attend an estimated 4 regional events. We keep our regional events within driving distance. Competition fees are estimated at \$200 for regional events. These fees will be broken down in to smaller payments and follow a collection schedule of 8/1, 9/1,10/1 & 11/1.

### **FUNDRAISING**

Please note: Several Optional fundraisers are held throughout the season\*\*\* You are welcome to participate as much or as little as you please for the fundraisers. We encourage fundraising as a way to help defray costs.

All-Star cheerleading combines elite stunting, tumbling, dancing and strength conditioning to teach goal setting and teamwork. Through practice, performance and competition, our staff strives to develop the whole athlete- physically, mentally, and emotionally. Our philosophy is that **EVERY** child can reach their potential through positive guidance and superior instruction.

WE HOPE YOU WILL BECOME A PART OF OUR FAMILY IN OUR FIERCE SEASON 5!!

zodiacsextremeallstars@gmail.com

www.zodiacsextreme.com 973-409-4119 209 Oak Ridge Road West Milford, NJ 07438



Students Name:			M/F
Date of Birth:	Age	Parent/Guardian's Nam	ne:
Home Phone #:		Cell Phone#:	
			_
		ate:Zip:	
***Email:			
Emergency Info /Emerg	gency Contac	<u>ct</u>	
Name:	Phone#:		
Relationship:			
Acknowledgment of Ris	k and Liabil	lity Waiver	
As legal guardian of		, I ł	nereby consent to the
		odiacs All-Star Cheerleading prog	
potentially sever injuries, incl	uding permaner	nt paralysis or death can occur in a	ny activity involving
height or motion, including da	ance, gymnastic	es, and related activities including t	rumbling and trampoline. I
-		iacs Athletics to provide for the sa	•
		hild to use these facilities, I hereby	
	•	d coaches from all liability for any	· ·
injuries suffered by my child	while under the	instruction, supervision or control	of Zodiacs Athletics.
As legal Guardian of the afore	ementioned pers	son, I hereby agree to individually	provide for the possible
_	_	red by my child as a result of any i	
•	· ·	r Cheerleading and/or Zodiacs Ath	• •
This acknowledgment of risk	and waiver of li	iability, having been read thorough	ly and understood
completely, is signed voluntar	rily as to its cont	tent and intent.	
Parent or Legal Guardian Sign	 nature Date		
Permission to Treat (optional			
· •		cal professionals to administer eme	rgency medical treatment
to my child should sickness of		•	<i>y</i>
		Parent or Legal Guardi	an Signature Date