



**FAMILY YMCA AT TARRYTOWN
All Star Cheer
Youth Registration Form 2023-2024**

Personal Information:

Student's Name: _____
Date of Birth: _____ Age: _____ Sex: _____
Address: _____ _____
Parent Cell Phone: _____
Allergies: _____

Parent/Guardian Information:

Name:	Home Phone	Work / Cell Phone:
Parent/Guardian:		
Email:		
Parent/Guardian:		
Email:		

Emergency Contact: Person to be notified in case of illness or accident.

Name:	Home Phone:	Work / Cell Phone:

PAYMENTS WILL BE PROCESSED ON THE 15TH OF EACH MONTH
Parent Statement of Understanding

I, the undersigned, give permission for my child to participate in all activities planned for the days my child attends YMCA Cheer Program.

I agree to release Family YMCA at Tarrytown and their faculty from all claims and liability in the event of personal injury or property loss.

In case of an emergency, I understand that every effort will be made to contact parents or guardians of my child. In the event that I cannot be reached, I hereby give permission to the physician selected by YMCA staff to care for my child.

I hereby give my consent to Family YMCA at Tarrytown, and to such other person(s) as Family YMCA at Tarrytown may designate, to use my child's name, voice, statements, and portrait or picture (motion or still) for advertising purposes, for purposes of trade, or for any lawful purpose whatever, in any media now known or hereafter developed.

I understand that when contact information changes, I will notify Family YMCA at Tarrytown.

I have read and fully understand the statement above.

Signature

Date

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Tuition: Y Dance \$100 per month for 1 class, each additional class is \$80
Y Cheer \$250 per month 3 days per week.

Refund Policy: The Family YMCA at Tarrytown can honor refunds for the following circumstances:

1. 100% refunds for requests 2 days prior to the first day of class
2. If the YMCA/Y Dance cancels class due to low enrollment
3. Documented Medical Reason (Doctor's note)

Any other circumstances the YMCA cancels will be considered for program credit (good for any YMCA program). *A \$10.00 fee will be assessed to process any refund/credit other than the YMCA canceling class.*

Please list your classes:

Name of Class:	Day/Time:	Instructor:
1. _____		
2. _____		
3. _____		
4. _____		

Credit Card info:

Name: _____

Credit Card Number: _____

Expiration Date: _____ CVV (code on back of card): _____