



## Razzle Dazzle Membership Registration

\$50 registration fee must be received to complete membership

Member Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Age: \_\_\_\_\_  
(First) (Middle) (Last) (Goes by)

Date of Birth: \_\_\_\_\_ School Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
(Where you attend Razzle Dazzle) (As of August)

Mailing Address: \_\_\_\_\_  
(City) (State) (Zip Code)

Parent/Guardian Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Contact # \_\_\_\_\_  
(First) (Last) (Father/Mother/Guardian)

E-Mail Address: \_\_\_\_\_ Facebook: \_\_\_\_\_  
(Name or e-mail address)

Parent/Guardian Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Contact # \_\_\_\_\_  
(First) (Last) (Father/Mother/Guardian)

E-Mail Address: \_\_\_\_\_ Facebook: \_\_\_\_\_  
(Name or e-mail address)

Other Contact Information: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship \_\_\_\_\_ Contact # \_\_\_\_\_  
(First) (Last) (To member)

### **MEMBER MEDICAL INFORMATION:**

Physician Name: \_\_\_\_\_ Office Phone # \_\_\_\_\_

Name of Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_

**PARENT RELEASE:** I understand Youth Spirit Squads, Inc dba: Razzle Dazzle is an independent organization from, and not directly sponsored by the school districts it serves. As with each program YSS/Razzle Dazzle may choose to suspend classes if program membership is less than five members. I agree not to hold YSS/Razzle Dazzle, its staff, officials or the school districts liable for personal injury, property damage or loss that may result from my registered student's participation in YSS/Razzle Dazzle group activities. This includes heirs who may not act in my behalf. I also authorize the above named person(s) to authorize any emergency medical care which would be deemed necessary by a physician. I further give YSS/Razzle Dazzle permission to publish photos that contain image(s) of my student's participation in the program on [www.cheerdancedrill.org](http://www.cheerdancedrill.org).

**PARENT COMMITMENT:** I have carefully read the **GENERAL INFORMATION** and **TEAM STANDARDS** [www.cheerdancedrill.org](http://www.cheerdancedrill.org). I will support and encourage my student to follow these team guidelines to the best of his/her ability. To process my student's registration, I will submit the \$50 non-refundable registration fee along with the first month \$60\* non-refundable participation fee with this form. I agree to pay all monthly participation fees no later than the last Friday of each month for the upcoming month. I further agree my student's participation will be suspended for payments not received until account is brought current. I also, understand there is no credit/refund for discontinued membership. I will submit all payments on-line to [www.cheerdancedrill.org](http://www.cheerdancedrill.org) or by money order mailed to YSS/Razzle Dazzle, 2420 Comanche Rd NE, B-3, Albuquerque, NM 87107. Any moneys raised through promotions offered through YSS/Razzle Dazzle, will be applied to his/her member account for program expenses and are non-refundable. I agree to pay a \$40.00 service fee to YSS/Razzle Dazzle for any check returned by the bank that was accepted on behalf of my student's participation. \*Fee is \$50 for student accounts set up on recurring automatic payment.

I have read and fully understand the **PARENT RELEASE** and **PARENT COMMITMENT** information and agree to abide fully by its terms.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_