



Cheer Champs Elite Summer Camps 2017

CAMP ROSTER & CANCELLATION AGREEMENT



PROGRAM NAME	TEAM NAME/DIV & LEVEL/# ATHLETES	COACH NAME
CAMP TYPE	1ST & 2ND CAMP DATE OPTIONS	CAMP LOCATION

1. A deposit of \$50 per person is due TWO WEEKS (14 days) after your camp reservation is made to hold your camp date. All deposits are per person and are non-refundable/non-transferable. If camp reservation is made prior to tryouts, a signed reservation agreement is due to hold reservation.
2. Final Balances are due in our office TWO WEEKS (14 days) prior to your camp date. Your camp reservation will be cancelled, and deposits/payments lost, if balance is not received two weeks prior to your camp.
3. All cancellations or changes must be submitted in writing and sent via email to camps@cheerchamps.com
4. For cancellations made six weeks or more prior to the first day of camp, the cancellation fee will be the \$50 deposit.
5. For cancellations made between three and six weeks prior to the first day of camp, the cancellation fee will be \$100 per person.
6. For cancellations made within three weeks of camp (21 days), the cancellation fee will be the total camp cost.
7. If deposit or balance of payment is guaranteed by school purchase order and cancellation occurs, teams are still responsible for all applicable cancellation fees based on the written cancellation date and criteria listed above.
8. If payment is guaranteed by school PO, we must receive the actual payment in our office within two weeks of your camp.
8. All additions, substitutions, cancellations, and changes should be submitted in writing prior to the first day of camp. If changes are made at camp, Cancellation fees and Change fees will be applied at camp. Change fees range from \$25 - \$100 per person/per change at the discretion of the company. The company does not guarantee additions/changes can be made at camp.

I have read the Cancellation Policy and understand and accept its contents. I will make sure this account is paid in full including fees as a result of cancellation. I have also advised all participants, parents, and chaperones of my group of this cancellation policy.

Coach/Advisor Signature _____	Date _____
Print Coach/Advisors Name _____	Date _____

*Each student attending camp must read and adhere to the cancellation policy and understand and accept its contents. By writing the campers names below, the coach/advisor agrees that they have advised each participant of this policy. Your registration will not be entered without all participants names (First and Last) represented.

	ATHLETE NAME	AGE	T-SHIRT SIZE <small>(A)ADULT (Y) YOUTH</small>		ATHLETE NAME	AGE	T-SHIRT SIZE <small>(A)ADULT (Y) YOUTH</small>
1.	_____	_____	_____	10.	_____	_____	_____
2.	_____	_____	_____	11.	_____	_____	_____
3.	_____	_____	_____	12.	_____	_____	_____
4.	_____	_____	_____	13.	_____	_____	_____
5.	_____	_____	_____	14.	_____	_____	_____
6.	_____	_____	_____	15.	_____	_____	_____
7.	_____	_____	_____	16.	_____	_____	_____
8.	_____	_____	_____	17.	_____	_____	_____
9.	_____	_____	_____	18.	_____	_____	_____