



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

**FAMILY YMCA AT TARRYTOWN
All-Star Cheer
Youth Registration Form 2024-2025**

STUDENT NAME

DATE OF BIRTH:

AGE:

SEX:

ADDRESS:

PARENT/GUARDIAN

PARENT CELL:

EMAIL

PARENT/GUARDIAN:

PARENT CELL

EMAIL

ALLERGIES:

EMERGENCY CONTACT NAME:

CELL:

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 its 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 the parents or guardians of my child. If 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 the Family YMCA at Tarrytown. I have read and fully understand the statement above.

Parent Signature

Date



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**FAMILY YMCA AT TARRYTOWN
CHEER PROGRAM PAYMENT AGREEMENT**

Tuition: \$275 per month 3 days per week. \$50 Registration fee due no later than August 15, 2024*

***YMCA Scholarships do not apply to registration fees. Any family seeking financial assistance must reapply every year for a YMCA Scholarship at least 30 days before the start of the session. Awards are based on # of applicants and available resources.**

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

1. If the YMCA cancels classes programs due to insufficient enrollment
2. Documented Medical Reason (A note from your physician is required)

PAYMENTS WILL BE PROCESSED ON THE 15TH OF EACH MONTH.

I agree to pay my child's tuition in the Family YMCA at Tarrytown Cheer Program

NAME ON CARD

CREDIT CARD NUMBER

EXPIRATION DATE

SECURITY CODE

CARDHOLDER SIGNATURE

QUESTIONS: Contact Cindy Guzman, Y Dance and Cheer Director at (914) 310-6457 or cindyg@ymcatarrytown.org