



**X-Factor Learning Academy @ Express Cheer**

**(Partnership with Texas Tutors)**



Let your child learn in a fun, safe, LOW risk environment. Our e-learning monitors help each student maintain schedules, stay on task and supervise them to ensure that required items are completed daily. We offer traditional seating (tables and chairs) as well as alternative seating (bean bags and mats).

We encourage students to bring headphones to plug into their personal laptop/tablet/smart device (devices will not be provided).

Class time is designated quiet time, please bring quiet time activities; books, coloring pages and quiet games.

**Schedule & Pricing:**

- Early drop-off 7:00a-8:00a \$25 per week
- Morning 8:00a-11:00a \$75 per week
- Mid-morning 11:00a-2:00p \$75 per week
- Afternoon 2:00p-5:00p \$75 per week
- Late pick-up 5:00p-6:00p \$25 per week

**Each session includes:**

- Snack/Meal Break (food not provided)
- Task Management
- Completed assignment logs/Communication with parents
- Social distancing enforcement
- Temperature checks
- Basic guidance when necessary
- Assist student with communicating with teacher when needed
- Physical Activity Break
- 1:13 staff monitoring
- FREE WIFI
- Printing Capabilities
- Access to refrigerator and microwave

**Our Staff:**

- Lead Staff have backgrounds in education
- CPR/First Aide Certified
- Certification in COVID 19 for Coaches and Administrators
- Background checks (local, state and national)

**Limited Spaces – Reserve your spot with a \$100 deposit (refundable until August 1st, 2020)**

**\$35 yearly enrollment fee (may not be applicable)**

**Students signing up for the Fall Semester in full will have first priority**

**Sign up for 4 weeks or more and receive a 10% discount (no-refunds, non-transferable)**

**10% sibling discount**

**Students with IEP goals or 504 accommodations, please contact us before enrolling**

### **Additional Services:**

**Express Cheer:** Specialty classes \$55/\$100 per month (one class per week/two classes per week)

[www.expresscheer.com](http://www.expresscheer.com)

- Tumbling
- Strength & Conditioning
- Stretching

### **Gibson Educational Services LLC, DBA – Texas Tutors (TT)**

[www.texas-tutors.com](http://www.texas-tutors.com)

- One to One Homework Support     \$35 per hour
- \*Group Homework Support         \$25 per hour, per person

\*Group Ratio – 1:3

10% off for 5 hours or more per week

15% off if the month is paid in full, in advance (20 or more hours per month)

**3<sup>rd</sup> – 5<sup>th</sup>:**

- Reading
- Writing/Social Studies
- STEM (Science, Technology, Engineering, Mathematics)

### **High School:**

- English
- Biology & Physiology
- Chemistry, Algebras, Geometry
- College Prep (ACT/SAT)

### **Our efforts to maintain a LOW-RISK environment:**

1. **Must wear a mask upon entry into the facility.**
2. Temperature checks upon arrival (remember if your athlete feels sick or you have a family member that feels sick, please do not send them to our facilities).
3. Immediate sanitation of hands when a participant enters our facility, as well as, sanitation of hands before and after participation.
4. No spectators. Our lobby is closed to non-participants.
5. Practice social distancing (6 ft.).
6. Sanitation stations are readily available throughout our facilities.
7. **When social distancing is not feasible, the use of a mask is required.**
8. **Staff members will wear a mask when they are unable to practice social distancing.**
9. If you have been exposed, we ask that you get tested and self-quarantine for 14 days before returning to our facility.
10. Drop off will be at the front of the building and pick up will be at the back of the building.
11. You must be registered in a program. No walk-ins.

### **Additional precautions we are taking:**

- UV Clear – [www.uvclear.net](http://www.uvclear.net)
- Guardian 50- [www.okbioservies.com](http://www.okbioservies.com)
- DIS.IN. FX – [www.disinfx.com](http://www.disinfx.com)
- Cleaning of equipment frequently by our staff

### **For more information:**

Web - [www.expresscheer.com](http://www.expresscheer.com)

Call - 972-731-5888

E-mail – [kristen@expresscheer.com](mailto:kristen@expresscheer.com)

Express Cheer - 9550 John Elliott Dr. – Ste. 104 – Frisco – 75033



# ENROLLMENT APPLICATION

Check one:    New Student    Sibling    Returning Student

**PARENT/GUARDIAN INFORMATION (Person responsible for the account)**

|                                   |                                  |                          |                      |
|-----------------------------------|----------------------------------|--------------------------|----------------------|
| <b>Mother/Guardian First Name</b> | <b>Mother/Guardian Last Name</b> | <b>Cell Phone Number</b> | <b>Allow Texting</b> |
|                                   |                                  |                          |                      |
| <b>Father/Guardian First Name</b> | <b>Father/Guardian Last Name</b> | <b>Cell Phone Number</b> | <b>Allow Texting</b> |
|                                   |                                  |                          |                      |
| <b>Mailing Address</b>            |                                  | <b>Home Phone Number</b> |                      |
|                                   |                                  |                          |                      |
| <b>City, State, Zip Code</b>      |                                  | <b>Email Address</b>     |                      |
|                                   |                                  |                          |                      |

**STUDENT INFORMATION (One Form Per Student)**

|                             |   |                   |            |
|-----------------------------|---|-------------------|------------|
| <b>Student's First Name</b> | <b>Student's Last name</b>  | <b>Birth date</b> | <b>Age</b> |
|                             |   |                   |            |
| <b>Gender</b>               | <b>Medical Conditions, Disabilities, Allergies, Issues, and/or Concerns</b> |                   |            |
|                             |   |                   |            |

**CLASS REGISTRATION & FEES**

|                              |  |                           |                                |
|------------------------------|--|---------------------------|--------------------------------|
| <b>Class #1</b>              |  | <b>Start Date</b>         |                                |
| <b>Class #2</b>              |  | <b>Start Date</b>         |                                |
| <b>Class #3</b>              |  | <b>Start Date</b>         |                                |
| <b>Class #4</b>              |  | <b>Start Date</b>         |                                |
| <b>Annual Enrollment Fee</b> |  | <b>1st Months Tuition</b> | <b>Regular Monthly Tuition</b> |
|                              |  |                           |                                |

How did you hear about us?    Friend    Mailer/Flyer    Ad    Internet    Other   **\*Please list your source below.**

Person(s) authorized to pick up child(ren): \_\_\_\_\_

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AGREEMENT AND MEDIA RELEASE**

In consideration of the above named students/participants participating in the programs of Express Cheer and Dance or White Rock Tumble & Cheer, a Spirit Athletics company, I represent that I understand the nature of the above enrolled activities and that I am or my children are qualified, in good health, and in proper physical condition to participate in such activities. I acknowledge that if I believe event conditions are unsafe, I or my children will immediately discontinue participation in the activities. I fully understand that these activities involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my or my children's own actions, or inactions, those of others participating in the activities, the conditions in which the activities take place, or the negligence of the "releasees" named below; and that there may be other risks either result or my or my children's participation in these activities.

I hereby release, discharge, and covenant not to sue Express Cheer and Dance or White Rock Tumble & Cheer, Spirit Athletics LLC, its respective owners, partners, administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I hereby approve, agree and release any photographs, video or audio recording ("MEDIA" herein) taken by employees or agents of Express Cheer and Dance or White Rock Tumble & Cheer, a Spirit Athletics company that include a depiction of my child during activities held at Express Cheer and Dance or White Rock Tumble & Cheer or any public event that includes Express Cheer and Dance or White Rock Tumble and Cheer, for use in whole or in part, in marketing, social media and/or training material or any other form deemed acceptable by Express Cheer and Dance or White Rock Tumble & Cheer. I hereby release and discharge Express Cheer and Dance or White Rock Tumble & Cheer, Spirit Athletics LLC, from any and all claims, damages or relief due to the use of such media. I hereby grant, assign and transfer to Express Cheer and Dance or White Rock Tumble & Cheer all rights and interest therein at no charge.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AGREEMENT AND MEDIA RELEASE, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

**X** \_\_\_\_\_ Date  
 Parent/Guardian Signature

|                        |   |  |
|------------------------|---|--|
| <b>OFFICE USE ONLY</b> | System Entry <input type="checkbox"/> _____ | Follow Up Email <input type="checkbox"/> _____ |
|------------------------|---|--|

# STUDENT ACCOUNT POLICIES

## Please read before enrolling student(s).

1. Tuition is due before the beginning of each week. A \$10 late fee will be charged to all accounts that are paid after at the beginning of each week. Students whose accounts are not current, will not be able to attend.
2. You are responsible for payment regardless of attendance. We do not prorate tuition except for the initial month.
3. We require a minimum of two weeks written notice withdrawal. You will be charged for the two weeks, and your children are encouraged to attend.
4. An annual enrollment fee of \$35 per student (maximum of \$70 per family) is due on each anniversary date of enrollment. (May not be applicable)
5. A \$30 charge will be made for each returned check and/or ACH.
6. If an account is submitted for collection, a \$25 processing fee will be added.
7. Additional services are available for additional fees and those fees must be in paid in full prior to participation.
8. Be sure to contact the office staff, not the instructors in writing, in person, by phone, or via the e-mail to update accounts, phone numbers, to make a payment, and/or withdraw.

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**Printed Name (Parent)**

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**Parent Signature**

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**Date**



# 2020-2021 X-Factor Learning Academy Enrollment Form

Student's Name \_\_\_\_\_ DOB \_\_\_\_\_ AGE \_\_\_\_\_ Sex: M/F  
Student's Name \_\_\_\_\_ DOB \_\_\_\_\_ AGE \_\_\_\_\_ Sex: M/F  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_  
T-Shirt Size circle one Child: XS S M L XL Adult: S M L XL  
T-Shirt Size circle one Child: XS S M L XL Adult: S M L XL

## Contact Information:

Parent's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Parent's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Parent's E-mail \_\_\_\_\_  
Emergency Contact Name (first & last) \_\_\_\_\_  
Relation to Student \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

## Medical Information:

Family Physician Name: \_\_\_\_\_ Physician's Phone # \_\_\_\_\_  
Any Operations, Illnesses or Injuries during the past school year? \_\_\_\_\_  
*Other Limitations:* \_\_\_\_\_  
Any Allergies? ...bee stings, food, etc. \_\_\_\_\_  
*What treatment is required?* \_\_\_\_\_  
Are immunizations up to date? Yes No Date of Last Tetanus Shot: \_\_\_\_\_  
Other medical issues we need to know: \_\_\_\_\_

## PERSCRIPTION DRUG POLICY:

*Must be in original container. Written physician's directions should accompany any prescribed medication. These directions must include the following information: name of medication, dosage, frequency, condition being treated and physician's name.*

Medication to be given to student: \_\_\_\_\_

## RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

In consideration of the above named students/participants participating in the programs of Spirit Athletics LLC, DBA -White Rock Tumble & Cheer and DBA - Express Cheer & Dance, I represent that I understand the nature of the activities and that I am or my children are qualified, in good health, and in proper physical condition to participate in such activities. I acknowledge that if I believe event conditions are unsafe, I or my children will immediately discontinue participation in the activities. I fully understand that these activities involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my or my children's own actions, or inactions, those of others participating in the activities, the conditions in which the activities takes place, or the negligence of the "releasees" named below and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost and damages I incur as a result of my or my children's participation in these activities.

I hereby release, discharge and covenant not to sue Spirit Athletics LLC, DBA -White Rock Tumble & Cheer and DBA - Express Cheer & Dance its respective administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers, and, if applicable owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk, I or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I have read the **RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT**, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Parent's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# 2020-2021 X-Factor Learning Academy Enrollment Form

Welcome student and parents:

Thank you for joining the X-Factor Learning Academy. We are very excited about our social distance/e-learning fun program and look forward to having you with us. This letter is to welcome you and remind you of our policies. Reminder, those committed to the full Fall session, will receive enrollment priority.

## **Drop off and Pick-Up Policy**

If you need to drop off special instructions, medications, forms, etc., please make sure you arrive a few minutes early on the first day to get this done. No student will be allowed in unless all forms and payment have been made and turned in. Please be prompt when picking up your child at the end of the day. If your child remains at the Academy past their pick-up time, there will be an additional charge. \$5 per 15 minutes past the enrolled session an athlete is enrolled in. Payment must be made in cash.

**Initial** \_\_\_\_\_

## **Payment Policies**

All balances are due before the beginning of each week. We have a strict **NO REFUND** policy and you may not transfer monies to other services. You may change a week with a two-week notice, however, there is a \$25 change/transfer fee. Remember: a student's spot is only guaranteed when registration and payment is made. You are paying for your child's spot in the X-Factor Learning Academy, not his/her attendance. We require auto draft be enabled for payments and a two-week notice is required to drop from the Academy.

**Initial** \_\_\_\_\_

## **Enrollment Forms**

All forms must be returned to us completed or your child will not be allowed to participate. Medical information **MUST** be filled out completely and **ALL** contact numbers must be current.

**Initial** \_\_\_\_\_

## **Fall Closure Dates:**

September 7 – November 23-27 – December 21- Jan 1

**Initial** \_\_\_\_\_

## **Student Check List**

- \_\_\_\_\_ Comfortable clothing. Younger children should bring extra clothing.
- \_\_\_\_\_ Please send LABELED water bottle, snacks and meals. The office does not carry change, if bringing change for snacks, BRING EXACT CHANGE!
- \_\_\_\_\_ Do not send any valuables, we will not be responsible for them!
- \_\_\_\_\_ Send your own devices for learning, headphones and any other necessary supplies or quite time items for your student (books, games, etc.
- \_\_\_\_\_ Medication sent with instructions and in ORIGINAL container and must be dropped off at check-in.

## **REGISTRATION AND TUITION**

**Payment Policies:** All balances must be paid in FULL before the start of each week. Discounts are available for pre-payment of 4 or more weeks and for siblings. We have a strict **NO REFUND** policy, but you may transfer monies to another week. **REMINDER:** You are paying for your child's spot in the X-Factor Learning Academy not his/her attendance.

Once again, thank you for joining the X-Factor Learning Academy! If you have any questions, please do not hesitate to call (972) 731-5888 or e-mail Kristen (Kiki) [kristen@expresscheer.com](mailto:kristen@expresscheer.com) or [kiki@expresscheer.com](mailto:kiki@expresscheer.com)





# Payment Contract Agreement

**Student's Name:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **E-Mail Address:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

\_\_\_\_\_  
(parent's initials) I acknowledge that, under the terms of this Agreement, the above named student will be charged a registration fee once a year and all tuition will be payable on the the week prior to attendance. If fees are not paid on time, I acknowledge that late fees will be charged and assessed. And I understand my student will not be allowed to attend.

\_\_\_\_\_  
(parent's initials) It is also acknowledged that FAILURE TO TAKE ATTEND WILL NOT RELIEVE ME OF ANY OBLIGATIONS TO PAY THE TUITON AGREED UPON, AND THAT NO REFUNDS OR MAKE-UP CLASSES FOR TUITON PAID SHALL BE MADE FOR NON-ATTENDANCE OR WITHDRAWAL.

\_\_\_\_\_  
(parent's initials) In addition, I understand by signing this page, I give Express Cheer & Dance and/or White Rock Tumble and Cheer the right to charge my cared on file each week.

\_\_\_\_\_  
(parent's initials) I understand that carrying a balance on my account, will hinder my student from attending, taking additional classes or private lessons until tuition has been paid. In addition, if monthly tuition is not paid by the week prior I will be responsible for a late fee and my student will not be able to attend.

\_\_\_\_\_  
(parent's initials) I acknowledge the monthly tuition does not include any additional charges (late interest, penalties, unbilled attorneys' fees, etc.) upon signing this agreement I agree to pay additional charges or fees which are incurred if it becomes necessary to collect the amount referenced in agreement.

\_\_\_\_\_  
(parent's initials) I understand that if any installment is late or missed, Express Cheer & Dance and/or White Rock Tumble and Cheer reserves the right to continue with the collections process and take whatever action is deemed necessary to recover the full amount of debt including but not limited to cancellation of this agreement and/or exclusion of your child from participation in all Spirit Athletics LLC (X-Factor Learning Acadmey) activities.

\_\_\_\_\_  
Parent/Guardian Printed Name                      / /  
Date

\_\_\_\_\_  
Parent/Guardian Signature                      / /  
Date



## Authorization Agreement for Collections

\_\_\_\_\_ (Name) hereby authorize Express Cheer & Dance and/or White Rock Tumble & Cheer to automatically bill my credit card/bank account my athlete's monthly tuition and any and all fees associated with his/her classes/squad. All requested information is required. Each week, your credit card / bank account will be billed for the amount indicated and your charges will appear on your statement. Any athlete/parent who wishes to change or cease payments entirely from the automatic payment system **must notify us in writing no less than 2 weeks prior to the automatic debit date.** All returned payments, declined credit cards, and or expired cards will result in a \$35 non-sufficient funds fee. It is the cardholder's responsibility to maintain the correct information. We acknowledge that the origination of transactions to our account must comply with the provisions of the U.S. law. **Please note that you are required to put both forms of payment on file.** You may check the type of payment you would like us to first process. Express reserves the right to process the second form of payment if your primary payment is declined.

### Customer Information:

Name: \_\_\_\_\_

Athlete's Name: \_\_\_\_\_

Credit Card Information \_\_\_\_\_ Please use this as my primary payment.

Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Billing Address associated with credit card:

\_\_\_\_\_

Town: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Bank Account Information \_\_\_\_\_ Please use this as my primary payment.

Name on Account \_\_\_\_\_

Name of the Banking Institution \_\_\_\_\_

Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_

I authorize, Express Cheer & Dance and/or White Rock Tumble and Cheer to automatically charge my credit card on file in the amount due, each week. I understand that my payment is to be withdrawn each week, prior to attendance.

Printed Name \_\_\_\_\_

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