



**399 Dad Clark Drive
Highlands Ranch , Colorado 80126
303-797-8082**

STARS CHEERLEADING and DANCE TEAMS

For children with special needs.

Dear Parent:

Thank you for your interest in our special needs' cheerleading and dance teams at Peak Athletics Plus. Peak Athletics has been committed to excellence since its inception in 1999. We currently have 8 competitive cheerleading teams and 7 competitive dance teams in addition to our Stars Teams. We are very proud of our record of excellence and are seeking athletes who demonstrate a positive attitude, strong work ethic, and a commitment to the sport.

The Stars Cheerleading Team has been an important part of the programs at Peak for many years. The Stars Dance Team was established last year and we are very excited about this program. These athletes will compete both locally and nationally and are expected to commit to weekly practices and performances. For the 2009-2010 season, our dancers will be traveling to one national competition but our cheerleaders will not travel this year. The teams will be practicing for 90 minutes per week beginning the week of July 10th. They will be performing approximately 4 times locally this year. Their season runs from July to March.

All prospective team members are required to submit the following registration form no later than June 30. Team members will be selected on a first come, first served basis; however, returning team members will have first priority.

You will be notified of your team status by July 5th and the first mandatory parent meeting for both cheer and dance will be on **Friday, July 10th at 6:15 in the dance room.**

Regular practices for cheer and dance will begin on Friday, July 10th. Practices will be held on Fridays from 5:15 to 6:45.

The team is partially funded by Peak's nonprofit organization; however, parents are expected to pay some of the team expenses. Financial obligations will include, but are not limited to a monthly tuition of \$55, a uniform rental fee of \$65, a team fee of \$40 annually, travel expenses and shoes. We are planning several fundraisers this year to help offset the costs associated with running these programs and your participation is extremely important.

We appreciate your interest in our program; please don't hesitate to call us with your questions.

Sincerely yours,

Julie Zecchino
Co-Owner

Vanessa Graziano
Dance Coach

Amanda Winston
Cheer Coach

STARS TEAMS- ATHLETE INFORMATION

This information will be used by the coaches for team data.

CHECK ONE: CHEER _____ DANCE _____

Participant _____ Phone # _____

Address _____

City, Zip _____ Age _____

School _____ Grade (2009-2010) _____ Birth date _____

T Shirt Size: *Circle One*

Youth: 6-8 10-12 14-16 Adult : Sm Med Lg XL

Shorts Size:

Youth: 6-8 10-12 14-16 Adult : Sm Med Lg XL

Parents' Names _____
Mom Dad

Work Phone _____
(used for emergencies only) Mom Dad

Occupation _____
(Optional) Mom Dad

Cell Phone _____
(used for emergencies only) Mom Dad

Email address (required) _____

Please print clearly and list all email addresses that you would like correspondence to go to throughout the year.

Does your child have a specific diagnosis? If so, please explain.

Please explain any physical limitations your athlete may have or anything you would like the coaches to be aware of that would help them understand your child better:

Tell us about your child's strengths and weaknesses.

Please remember that it is your responsibility to keep the coaches informed of any changes in your child's health with regard to his/her limitations at practice or a performance.
