

Extreme Choreo, LLC
 143 Morningside Ave
 Park Ridge, NJ 07656
 201-523-1581



2026 RIVER VALE RAIDERS CHEER

Registration Form

Payment is due June 1st, 2026

Athlete Name: _____	Parent Name/Cell #: _____
Address: _____	Emergency Contact/Cell #: _____
City, State, Zip: _____	Medical Problems: _____
Current Grade: _____	EMAIL Address: _____

River Vale Raiders Cheer Team Schedule

Choreography Week			Review Week			Weekly Sessions		
<i>Athletes should wear t-shirt, shorts, sports bra and cheer sneakers.</i>			<i>Athletes should wear t-shirt, shorts, sports bra and cheer sneakers.</i>			<i>September 4, 11, 18, 25 October 2, 9, 16</i>		
Team	Date	Time	Team	Date	Time	Team	Day	Time
Peewee	Aug 17-20	9am-12pm	Peewee	Aug 24 & 25	9am-11am	Peewee	Friday	4-5pm
Junior	Aug 17-20	9am-12pm	Junior	Aug 24 & 25	9am-11am	Junior	Friday	4-5pm
Senior	Aug 17-20	9am-12pm	Senior	Aug 24 & 25	9am-11am	Senior	Friday	5-6pm

Location: Mark Lane, River Vale, NJ

Pricing Summary

FULL PAYMENT OF \$265 PER ATHLETE

<u>Summary</u>	<u>Teams</u>	<u>Amount</u>
Registration	Peewee, Junior, Senior	\$45.00
August Choreography	Peewee, Junior, Senior	\$175.00
August Review	Peewee, Junior, Senior	\$60.00
September	Peewee, Junior, Senior	\$45.00
October	Peewee, Junior, Senior	\$60.00
Paid By RVJFA	Peewee, Junior, Senior	-\$120.00

TOTAL

\$265.00

DUE June 1st PAYABLE TO EXTREME CHOREO, LLC

WAIVER

EXTREME CHOREO, LLC WAIVER Permission/Consent for Minor Participation

As legal guardian of the above named student, I hereby consent to the aforementioned person participating in the Extreme Choreo, LLC programs. I recognize that potentially severe injuries, including paralysis or death can occur in any activity involving height or motion, including dance, gymnastics, stunting, tumbling and trampoline work.

I understand that it is the express intent of Extreme Choreo, LLC to provide for the safety and protection of my child and in consideration for allowing my child to use these facilities. I hereby forever release Extreme Choreo, LLC, its employees, teachers, coaches, from all liabilities for any and all damages and injuries suffered by my child while under the instruction, supervision of Extreme Choreo, LLC.

As legal guardian of the aforementioned person, I hereby agree to individually provide for the possible future medical expenses which may be incurred by my child as a result of any injury sustained while training at or performing for, Extreme Choreo, LLC.

This Acknowledgement of the risk and waiver of liability, having been read thoroughly and understood completely, is signed voluntarily as to its content and intent.

Parent/Guardian signature: _____

Date: _____

PAYMENT

ATHLETE NAME: _____ TEAM: **PEEWEE JUNIOR SENIOR**
Please Circle

PAYMENT:

- **\$265.00 PER ATHLETE**
- **CHECKS PAYABLE & MAIL TO:**
EXTREME CHOREO, LLC,
143 MORNINGSIDE AVE
PARK RIDGE, NJ 07656
- **\$30.00 RETURNED CHECK FEE**
- **OR YOU CAN VENMO @Judy-Derosa**

AMOUNT ENCLOSED: _____