

Cheer Academy All Stars

REFERRAL FORM**

Date: _____

Name of person being referred: _____ Referred by: _____

Contact Information of person being referred: _____
(Home Phone) (Cell Phone)

Street Address: _____ City: _____ Zip: _____

Briefly describe how you know the person you are referring: *(Example: I meet them while tagging, friend, or they go to my school)*

You are referring this person for the following: *(circle the one that applies)*

Tumbling Class

Stunt Class

Dance Class

Competitive Team Member

**Referrals can be made for classes and competitive teams. Referrals must be NEW to ASTA & CAAS *(they can not be someone who has taken classes at ASTA and then be referred for a CAAS team as no referral fees will be paid for past customers)*. Payment for class referrals is \$5.00 and for competitive teams is \$50.00. The referral fee will be paid into your CAAS account or credited to your ASTA account. The \$50.00 referral fee for competitive team members will be broken down into two payments: \$20.00 after choreography camp; and \$30.00 after the first competition.

Office Use Only (Please do not write below this line):

CAAS or ASTA Credit *(circle one that applies)*

CAAS or ASTA Credit *(circle one that applies)*

___ Team Placement

___ Class Placement

___ \$20.00 fee paid – date: _____

___ \$5.00 fee paid – date: _____

___ \$30.00 fee paid – date: _____

___ Other _____

Transfer of referral fee or credit completed by: _____ Date: _____

Notes: