

GSGA Sports Programs Registration

Mother/Guardian Name: _____ Occupation: _____

email address: _____

home# _____ work# _____ cell # _____

Address: _____ City: _____ Zip: _____

Father/Guardian Name: _____ Occupation: _____

email address: _____

home# _____ work# _____ cell # _____

Address: _____ City: _____ Zip: _____

Child's Name: _____ Male/Female Birthdate: ____/____/____

Allergies/Medical Problems _____ Medications: _____

Child's Name: _____ Male/Female Birthdate: ____/____/____

Allergies/Medical Problems _____ Medications: _____

Child's Name: _____ Male/Female Birthdate: ____/____/____

Allergies/Medical Problems _____ Medications: _____

Insurance Information:

Name of Policy Holder: _____

Insurance Company: _____ Policy Number: _____

Emergency Contact (other than parent/guardian):

Name: _____ Relationship: _____ Phone: _____

If you are enrolling a new student, how did you hear about us?

Yellow Pages Friend Mailer Internet Magazine Other: _____

For your children's safety

please initial

- Parents of children under 6 years old, please stay on site with your children. _____
- ALL children **MUST** wait inside the building or on the pool deck for their parents to come inside to pick them up. _____

I have read the payment policy, parent pick up, release of liability, permission to treat, appearance agreement, and transportation release on the reverse side.

Parent or Legal Guardian Signature: _____ Date: _____

SWIM PAYMENT POLICY:

- Tuition payment is for one (1) session. Payment is due by the 1st lesson. We do not pro-rate currently enrolled students
- A late fee of \$15.00 will be added to accounts not paid by the 2nd day of the session.
- A \$30.00 fee will be added to returned checks.
- We reserve the right to refuse service for unpaid accounts.
- You are responsible for paying all programs in which you have enrolled.
- Once funds are put into the system, GSGA will credit 100% of any unused funds in any other program or the store for up to six (6) months. **No Refunds** will be given.
- Registration and Deposit fees are non-refundable.

BAD WEATHER / CANCELATION POLICY

Please remember lessons are taught in an outdoor pool. We sometimes have to deal with elements. This could include thunder and lightening, fecal or vomit accidents in the pool, wind storms, etc. If **we** have to cancel lessons, we will do our best to provide a your child with a make-up. If **you** choose to miss a lesson, no make-up will be given.

Make-ups could be in the form of:

- Extra time added on to the remainder of lessons.
- An additional day scheduled for the lesson.
- Scheduling individual make-ups in another class.



**GEM STATE
GYMNASTICS**
ACADEMY ~ Since 1976

PAYMENT POLICY:

You have the following options to make payment:

- Cash or Check: due by the 1st of the month
- EFT - Have your monthly bill taken out of your account directly and receive an EFT discount. Payments are deducted on the 27th of the previous month for next months tuition. If the 27th falls on a holiday or weekend, then the deduction will take place on the Monday after.
- If tuition has not been paid by the 10th of the month, the credit card on file will be charged.
- If payment is denied in one of the above payment methods, your child will be dropped from the program and the spot will be filled from the wait list.
- We do not pro-rate currently enrolled students
- A \$30.00 fee will be added to returned checks.
- We reserve the right to refuse service for unpaid accounts.
- You are enrolled from your starting date until you notify the office that you will be dropping from the program. You are responsible for paying for all programs in which you have enrolled. Written notice must be given by the 20th of the previous month to make changes or withdraw from the program which you have enrolled.
- Once funds are put into the system, GSGA will credit 100% of any unused funds in any other program or the store for up to six (6) months. **No cash refunds** will be given.
- Registration and Deposit fees are non-refundable.
- Anyone on EFT must sign up for three (3) months before they can be removed from EFT. A \$10.00 cancellation fee will be charged for withdrawing from EFT early, plus all discounts are lost. Written notice must be received by the 20th of the month to cancel EFT. If the deadline is missed, no refunds will be given; however, we will credit your account to be used in any other program (including store). If there is a remaining balance once you have cancelled your EFT, the balance may be pulled out of your account before finalizing the drop process.
- To re-activate EFT more than once within the calendar year, there is a \$15.00 administration fee.
- All discounts are lost when accounts go into past due status.

Release of Liability and Notification of Risk

As parent/guardian of the above student(s), I hereby represent that my child/ward is physically fit to undertake the gymnastics, dance, swimming, trampoline, daycamp or other activity at Gem State Gymnastics Academy, (herein after GSGA). I acknowledge the existence of certain risks of personal injury in participation in any of these activities. These activities like any other athletic activity involving motion and height, involves a risk of injury. Injuries can include broken bones, sprains, lacerations, internal injuries, paralysis, or even death. These are risks that anyone participating in these activities assumes. My child/ward is assuming these risks by participating in any of the above activities. To reduce these risks, participants must follow all GSGA rules and remain in excellent condition. I hereby agree that my child/ward will follow all GSGA rules and that I will instruct him/her to do so.

In consideration of the right of my child/ward to participate in GSGA activities I, as Parent/guardian, hereby agree that I waive and release all rights and claims for injury, damages and loss that I may have at any time against GSGA, its representatives, employees and agents, whether paid or volunteer, for any loss, injury or damages whatsoever, including, but not limited to, any claim I may have for loss of consortium, medical expenses, wage loss, or any other claim as a result of injuries my child/ward incurs in connection with my child/ward's participation in GSGA's activities. This release and the following agreement to indemnify shall include, but not be limited to, any claim arising from injuries my child/ward may incur as a result of the negligence of GSGA, its representatives, employees, and agents, whether paid or volunteer.

In addition to the foregoing, I hereby agree to defend, indemnify, and hold harmless GSGA, its representatives, agents, and employees, whether paid or volunteer, from and against any and all liability for any claims, demands, losses, damages, actions causes of actions or suits of any kind or nature whatsoever, and particularly on account of all injuries or loss, to either person or property, which may result directly or indirectly from my child/ward's participation in activities at GSGA.

This release and agreement to indemnify is binding upon my heirs, legal representatives, agents, and assignees.

I understand that participation is entirely by my own choice. I hereby agree to individually provide for the possible future medical expenses incurred by my child/ward as a result of any injury sustained while participating in any of GSGA's programs. This acknowledgment of risk and waiver, having been read thoroughly and understood completely, is signed voluntarily as to its content and intent.

Permission to Treat

I hereby give my permission to trained medical professionals to administer emergency medical treatment to my child should sickness or accident occur in my absence.

Appearance Agreement

I understand that GSGA produces promotional material relating to it's programs. I understand that as a participant my child/ward or myself may be included in videotapes or photographs taken during participation. Therefore, without reservation or limitation, I, in my own behalf and on behalf of my child/ward, hereby assign, transfer and grant to GSGA, it successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape myself or my child/ward and to utilize such videotapes and photographs in advertising and promoting of programs.

Transportation Release

I hereby give my permission for G.S.G.A., its representatives, employees, and agents, whether paid or volunteer, to pick up and transport my child to G.S.G.A. from the elementary school listed above or for field trips.

Parent or Legal Guardian Signature: _____ Date: _____

Wiggler Release of Liability and Notification of Risk

Name of child participant (if under 18): _____

Name of adult participant/parent: _____

I, (we) despite all reasonable precautions implemented for safety, am (are) fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis and even death, as well as other damages and losses associated with participation in the programs or activities. I (we) knowingly and willingly assume all such risks. Consequently, I (we) hereby for myself, heirs, executors, and administrators, do waive and release any and all rights and claims for damages against the owner, operators, coaches, and other members of Gem State Gymnastics Academy (the releasees) from personal injury or accident of any sort or nature suffered by me (us), the undersigned, by reason of participation or membership in classes, lessons or any programs or activities of Gem State Gymnastics Academy.

Additional Adults Signatures Who May Accompany Student to Class

1. _____ 2. _____

3. _____ 4. _____

Minor Release

I, _____ the minor's parent and/or legal guardian, understand the nature of these activities and
Name of Parent/guardian)

the minors' experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the releasee's from all liability claims, demands, losses, or damages on the minor's account, including negligent rescue operations. I further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releasees named above, I will indemnify, save, and hold harmless each of the releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim.

Parent or Legal Guardian Signature _____ Date: _____