

CLEMMONS GYMNASTICS CENTER
REGISTRATION FORM

*Please see brochure
for registration details

For Office Use:
QB ____ CC ____

Student's Name _____ Birthday _____

Address _____ City, State, Zip _____

Parents' Name: Mother _____ Father _____

Phone #'s: Home _____ Parent(s) Work _____

Email Address: _____ Would you like to receive emails from us? _____

Special Physical or Medical Conditions _____ Explain _____

PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION

(Must be completed for participants under the age of 18)

In consideration of _____ (print minor's name) ("minor") being permitted by CGC to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless CGC from any and all Claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian: _____ Print Name: _____ Date: _____

PARTICIPANT AGREEMENT RELEASE FORM AND ASSUMPTION OF RISK

In consideration of the services of Clemmons Gymnastics Center, Inc., hereinafter collectively referred to as "CGC", their agents, owners, officers, employees, and all other persons or entities acting in any capacity on their behalf, I hereby agree to release and discharge CGC, on behalf of myself, my children, my parents, my heirs, assigns, personal representatives and estate as follows:

1. I understand and acknowledge that the activity my child is about to engage in poses known risks and unanticipated risks which could result in injury, paralysis, death, emotional distress, or damage to my child, to property, or to third parties.

The following describes some, but not all, of those risks: Gymnastics entails certain risks that simply cannot be eliminated without jeopardizing the essential qualities of the activity. Without a certain degree of risk, gymnastics students would not improve their skills, and the enjoyment of the sport would be diminished. Gymnastics exposes its participants to the usual risk of cuts and bruises. Other more serious risks exist as well. Participants often fall off equipment, sprain or break wrists and ankles, and can suffer more serious injuries as well. Traveling to and from shows, meets and exhibitions raises the possibility of any manner of transportation accidents. In any event, if your child is injured, your child may require medical assistance at your expense.

1. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, no one is forcing me or my child to participate, and we elect to participate in spite of the risks,

2. I hereby voluntarily release, forever discharge and agree to hold harmless and indemnify CGC from any and all liability, claims, demands, actions or rights of action, which are related to arise out of, or are in any way connected with my child's participation in this activity.

3. Should CGC, or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and reimburse them for such fees and costs.

4. I certify that my child has health accident and liability insurance to cover any bodily injury or property damage that may be caused or suffered while participation in this event or activity, or else I agree to bear the costs of such injury or damage to my child. I further certify that I am willing to assume the risk of any medical or physical condition my child may have or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.

5. In the event that I file a lawsuit against CGC, I agree to do so solely in the state of North Carolina, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portion shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against CGC on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Participant or parent _____

Print Name _____

PLEASE REMEMBER THAT OUR PROGRAM IS YEAR ROUND. A WRITTEN NOTICE OF WITHDRAWAL TO THE OFFICE (NOT THE INSTRUCTOR) IS REQUIRED 30 DAYS IN ADVANCE OF WITHDRAWING A STUDENT FROM ANY PROGRAM. PAYMENT IS REQUIRED AT THAT TIME THROUGH FINAL DATE OF WITHDRAWAL.

(OVER)

Photograph Release Agreement

By signing this release form, I consent to my child for each and every use by Clemmons Gymnastics Center, and all of its employees to each photograph, videotape or other likeness of my child or myself taken. Such use may include, but not limited to, every use in a publication, newspaper, advertisement, website, videotape presentation, television show, Facebook or other publication or recording. I also waive any right to compensation for such uses, or to inspect or approve the uses beforehand.

I release Clemmons Gymnastics Center, its legal representatives and all persons acting under its permission or authority, from any liability for any blurring, distortion, alteration or optical illusion that may occur with these pictures.

SAFETY RULES

We at the Clemmons Gymnastics Center feel there are certain qualifications and standards that are necessary to ensure a safe, secure and satisfying gymnastics environment in our facility.

1. **Only members of Clemmons Gymnastics are allowed on the floor or any equipment.**
2. **No one** may go on the **floor** or **any equipment** at any time without an instructor present.
3. Be on time for your class. Warm up time is very important for your child's safety. **NO use of equipment** before or after class. **NO jumping on trampoline** without an Instructor. **NO horseplay** is allowed.
4. **NO new skills** may be attempted without an instructor's permission.
5. Parents, as well as non-participating siblings, friends, etc., are not allowed in gym area. Please watch from the lobby. Non-participating children need to be sitting with parents or playing quietly in the "Lobby Area." Parents are responsible for any children making use of this area including keeping the lobby clean. If your child needs to use the restroom, they must be escorted by an adult to the restroom and back to the lobby.
6. Be aware of others in the gym. Do not walk across tumbling paths, vaulting paths, or dismount areas without looking first.
7. Enter and leave gym area through the lobby area only; do not use side doors.
8. Girls are required to wear gymnastics (not a dance leotard) leotards.
9. Boys and later TNT classes are required to wear tight fitting apparel.
10. Hair needs to be up and out of your face at all times.
11. **NO jewelry** may be worn.
12. **NO food, gum, candy, or drinks** are permitted on the floor.
13. We are not responsible for any items left in the gym; however, we do have a Lost and Found.
14. **A positive attitude is required at all times.**

REGISTRATION RULES AND POLICIES

1. Registration: **\$25** is due before you start your class.
2. No reservations will be made without payment or a completed registration form.
3. We reserve the right to cancel or combine classes if a minimum enrollment is not met.
4. We do not require you to sign a contract. However, we assume all our students will continue throughout the session unless we receive a 30 day written notice prior to leaving the program. Failure to do so will result in a charge for the month.
5. **Our Discount Policy:** Families registering more than one child or for more than one class will receive a discount.
6. **Make-up Policy:** One make-up class per month is permitted and must be made up within the month of missed class. Please call the gym to schedule a make-up. (You are not allowed to make-up a class if you have an outstanding balance on your account.)
7. **Fees:** Tuition is due on the **1st** of each month. If tuition is received after the **10th** a \$10 late fee will apply. You may mail your tuition check or drop it in our tuition box at the lobby. Please put your child's first & last name in memo.
8. **Outstanding Balances:** They are subject to **Attorney Fees** and **Court Cost**.
9. **Returned Check Fees:** There is a \$25 charge for returned checks and a \$10 late fee charge.
10. **Assumption of Risk Policy:** I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against Clemmons Gymnastics Center on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.
11. **Drop Policy:** Please remember that our program is year round. A written notice of withdrawal to the office is required 30 days in advance of withdrawing a student from any program. This means you must give the office a written notice of withdrawal on the first day of the month. If it isn't given on the first of the month, you will owe a full payment for the next month. For example-If you turn in your notice on January 5th, your last month will be February. You will owe for the entire month of February. **WE DO NOT PRORATE...**(Payment is required at that time through final date of withdrawal)
12. **No Refund Policy:** **WITHOUT ANY EXCEPTION** there are **NO REFUNDS** for any paid program here at Clemmons Gymnastics.

Date: _____

Print Child's Name: _____ Signature of Participant or Parent: _____

By signing this form you have acknowledged our **PHOTOGRAPH RELEASE AGREEMENT, SAFETY RULES, REGISTRATION RULES, POLICIES, OUTSTANDING BALANCES, ASSUMPTION OF RICK POLICY, DROP POLICY, 30 DAYS WRITTEN NOTICE,** and **WITHOUT ANY EXCEPTION** there are **NO REFUNDS**.