



2 Lilac Drive Flemington, NJ 08822

Gymnastics Unlimited

Phone: 908-782-8887

Fax: 908-782-1846

www.GU-NJ.com

Registration, Automatic Payment, & Waiver

Program: Cheerleading Gymnastics Party/Event Team

Parents Names: _____ Years in Program: _____

Address: (street, state, & zip) _____

Phone: Home: _____ Cell: _____ Work: _____

Email: _____

Emergency Contact (other than parent): _____ Phone: _____

Physician Name/Phone: _____ Insurance: _____

Please use reverse side for additional family information.

How did you hear about us? Yellow Pages Newspaper Internet Trial Class Postcard or Flyer
 Bring a Friend Referral: Who may we thank? _____

Student: First & Last Name	M/F	Birth Date	Gymnastics Class Day/Time	School/Grade
1.				
2.				
3.				

Method of Payment Visa MasterCard Cardholder's Name _____

Card # _____ Exp Date _____ Sec. Code _____

Billing Address (if different from home address above) _____

Authorization for Medical Treatment

I fully understand that Gymnastics Unlimited staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the Gymnastics Unlimited Staff to give first aid to myself, child or children in the event of any injury or illness, and if deemed necessary by staff to call a doctor or ambulance to seek medical help, including transportation by its representatives, whether paid or volunteer, to any health care facility or hospital. I also authorize the physician and/or hospital to perform treatment for any injury or illness to child, children or myself. I authorize payment for treatment, either personally or through our family health insurance. _____ Initials

Risk of Injury

I have been made aware of the risks and hazards associated with the sport of gymnastics, trampolines, tumbling, cheerleading, dance, ropes course elements, and all other activities. Students may suffer injuries, possibly minor, serious, or catastrophic in nature, and/or including death. Parents will make their children aware of the possibility of injury and encourage their children to follow all safety rules and coach's instruction. The Gymnastics Unlimited Staff will not accept responsibility of injuries sustained by any student through the course of instruction in gymnastics, trampolines, tumbling, cheerleading, dance ropes course elements, competitions, special events, camps/clinics, transportation and all other activities. _____ Initials

Consent to Participate

With the above in mind, and being fully aware of the risks and possibilities of injury involved, I consent to have myself or child participates in the programs provided by Gymnastics Unlimited I, my executors, or other representatives, waive and release all rights to claims for damages that I or my child may have against Gymnastics Unlimited and/or its representatives whether paid or volunteer. I also affirm that I now have and will continue to provide proper hospitalization, health and accident insurance coverage, which I consider adequate for both my child's protection and my own protection. I also understand it is the parent's responsibility to warn the child about the dangers of injury. Gymnastics Unlimited will only warn students through "safety rules" and our teaching style and progressions. _____ Initials

Photography Release

I release myself or my child's photo or video to be used in any positive manner in association with Gymnastics Unlimited. I.e. newspaper press releases, advertising, web page, etc. Permission is also granted to the studio to copyright such photographs in its name. _____ Initials

As the legal parent or guardian, I release and hold harmless Gymnastics Unlimited, its owners and operators from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of Gymnastics Unlimited, its owners and operators or in route to or from any of said premises.

Allergies: _____ Medications _____

Physical/mental limitations or situations _____

Please use reverse side for additional information related to medical or family situations.

Guardian Signature _____ Date _____

Last/First Name



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Additional Family Contact Information

Name:

Mailing Address:

Phone: Home:

Cell:

Work:

Email:

Name:

Mailing Address:

Phone: Home:

Cell:

Work:

Email:

Additional Medical or Family Situation Information



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Policies and Procedures

Registration and Insurance Fee

The registration fee is a non-refundable fee of \$35.00 of \$35.00 per child per year, maximum \$55 per family and is required yearly at time of registration. This covers administrative paper work, mailings, newsletters and secondary insurance coverage.

Tuition

Tuition is due two weeks prior to the start of the session. Tuition is prorated for students entering the class after the session has begun providing space is available. Deduct 10% for each additional family member. Checks are made payable to **Gymnastics Unlimited**.

All returned checks, declined credit card have a \$35 returned fee.

Communications

Gymnastics Unlimited communicates primarily through e-mail. You may also find information on our website www.gu-nj.com. It is your responsibility to keep e-mail/US mail addresses and phone numbers current with the office staff. It is also the parent's responsibility to check the bulletin board for any announcements, or upcoming event information.

Withdrawals and Refunds

To withdrawal from a class a parent must:

1. Inform school administration in person, and
2. Complete and sign a withdrawal form provided by the office.

Attendance and Lateness and Make ups

Make ups will be offered whenever possible for

Xxxx make ups classes

School Closings/Extreme Weather

The school will be closed Labor Day, Halloween, week of Thanksgiving, Christmas and EISD Spring Break, New Year's Eve, New Year's Day and Memorial Day. All classes that are cancelled for a one day holiday will be rescheduled. When all classes are cancelled for the week there will be no make-ups. In the event of extreme weather conditions GO! Dance and Gymnastics Studios follows the EISD School Closing Policy. If EISD closes down due to weather we will be closed due to weather and no make-ups will be offered. Schedule of Events calendars are available at the front desk.

Conduct (Parents & Students)

Parents and students must conduct themselves in a respectable manner at all GO! Dance & Gymnastics Events. This means supporting all GO! Dance & Gymnastics Teams, individuals and philosophies in a positive manner. If a problem should arise please direct it to the Office Manager or Owner directly.

Dress Code

Required dance & gymnastics wear and shoes must be worn to all classes, these are to be purchased before the 2nd week of classes. Failure to wear required dance wear to class can result in students being asked to sit out of class. See class dress code for your specific class.

Care of Students

The school is not responsible for providing before and after class care for students. Students are not to be left at the school for excessive time periods before or after their classes. Late Pick up Fee \$5.00 per 15 minutes.