

Corkscrew Gymnastics & Sports Academy Registration Form

Gymnast's Name _____ Male Female

Date of Birth ____ / ____ / ____ Age ____ Home Phone _____

Address _____ City _____ Zip _____

Mother's Full Name _____ Phone _____ Cell Work

Father's Full Name _____ Phone _____ Cell Work

Contact e-mail address: _____

How did you hear about CGSA? Website Advertisement (which one) _____
 Outdoor Sign Friend (Name) _____ Other _____

Emergency Information: Other than parent (parents will be contacted first)

Contact Name _____ Relationship _____

Phone _____

Are there any known medical conditions, previous injuries, special needs, or custodial arrangements we should be aware of?

Yes No Please explain: _____

Park District Make Up Policy

Park District classes do not receive Make Up classes for missed classes, except if the class falls on a holiday that we are closed (New Years Day, Memorial Day, July 4th, Thanksgiving, Christmas)

Gym Etiquette

Please arrive on time and allow time to place shoes/clothing away and to use the bathroom if needed.

Parents and non-registered children are not allowed in the gym area or on equipment. The only exception is for Parent N Tot classes (1 parent per child) and to use the restrooms.

Appropriate clothing is required. No baggy clothing, hoodies, belts, jeans or clothing with zippers. Shirts need to be able to be tucked in. No skirts/tutu with leotards. Long hair should be pulled back. No jewelry or gum.

For the protection of all the gymnasts, staff, and guests please assist us in keeping children home who have been sick within the 24 hours leading up to class or practice. In the event a gymnast becomes sick while at the gym the family will be notified and prompt pick up arrangements will be made.

There is no food or drinks (except water) allowed in the gym or gym waiting room. Food and drinks are allowed in the lobby waiting room.

If you have any concerns, please speak with your child's coach or office staff. We are open to comments (good and bad). We want CGSA to be a positive experience for everyone!

Office Use only

Class _____ Start Date _____

Class Day(s) _____ Time(s) _____ New Restart

Corkscrew Gymnastics & Sports Academy Park District Rules and Policies

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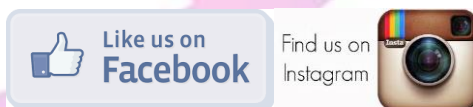
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Lastly, have "A Twistin' Good Time!"

This is your copy to keep and please check off on registration form that you have received the Rules & Policies.



Name of Participant: _____

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

COVID-19 has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Corkscrew Gymnastics & Sports Academy has put in place preventative measures to reduce the spread of COVID-19; however, Corkscrew Gymnastics & Sports Academy cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending Corkscrew Gymnastics & Sports Academy could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Corkscrew Gymnastics & Sports Academy that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at Corkscrew Gymnastics & Sports Academy may result from the actions, omissions, or negligence of myself and others, including, but not limited to, employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at Corkscrew Gymnastics & Sports Academy or participation in Corkscrew Gymnastics & Sports Academy programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless Corkscrew Gymnastics & Sports Academy, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Corkscrew Gymnastics & Sports Academy, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Corkscrew Gymnastics & Sports Academy program.

Signature of Parent/Guardian

Date

Name of Parent/Guardian

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in any Gymnastics and Tumbling activity ("Activity") at any time during the current calendar year I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of Gymnastics and Tumbling Activities and that I or that of the minor are qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe the conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) Gymnastics and Tumbling ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Corkscrew Gymnastics & Sports Academy its administrators, directors, agents, officers, members, volunteers, team members, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the RELEASEES herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may be incurred as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: _____

ADDRESS: _____
(Zip) (Street) (City) (State)

PHONE: _____

PARTICIPANT'S SIGNATURE: _____

DATE: _____

Below section must be completed by Parent/Guardian for any participant under the age of 18.

MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF Gymnastics and Tumbling ACTIVITIES AND THE MINOR'S 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 CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIMS 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 ANY COST THAT MAY OCCUR AS A RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: _____ I HAVE READ THIS RELEASE

ADDRESS: _____
(Zip) (Street) (City) (State)

PHONE: _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): _____ I HAVE READ THIS RELEASE

DATE: _____

