

# 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: \_\_\_\_\_

## Payment Information

Payment is required to the child's first class of each session and **must be paid within 48 hours after registration**. All returned checks will have a \$25 service charge. There will be a \$20 reversal fee on credit cards if you do not notify us that you wish to stop autopay in the first week of class. **There are no refunds given after the first week.** Priority registration is given to currently enrolled students to guarantee a spot for the next month. New students will be placed in open spots after currently enrolled students have reserved their spot. Tuition will be prorated for new students only.

## Make-Up Policy

Students are allowed one make up class within their current month and must be scheduled in advance with the office. Please call the office if you know your child will not be attending their regular class. **If you schedule a make-up class and do not show or let us know that you will not be here, you will forfeit your make-up.**

## Annual Registration Fee

There is a non-refundable Annual Registration Fee. If you register for classes beginning:

August 1<sup>st</sup> – October 31<sup>s</sup> \$\$\$44.50

November 1<sup>st</sup> – January 31<sup>s</sup> \$36.50

February 1<sup>st</sup> – April 30<sup>th</sup> \$28.50

May 1<sup>st</sup> – July 31<sup>st</sup> \$20.50

*Office Use only*

Class \_\_\_\_\_

Start Date \_\_\_\_\_

Class Day(s) \_\_\_\_\_ Time(s) \_\_\_\_\_

New  Restart

# Corkscrew Gymnastics & Sports Academy Rules and Policies

## Payment Information

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## Annual Membership Fee

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August 1<sup>st</sup> – October 31<sup>st</sup> \$44.50

November 1<sup>st</sup> – January 31<sup>st</sup> \$36.50

February 1<sup>st</sup> – April 30<sup>th</sup> \$28.50

May 1<sup>st</sup> – July 31<sup>st</sup> - \$20.50

## Class Change Policy

Students are allowed to change their class day and time up until their 1<sup>st</sup> day of class, as long as space is available. After that they must stay in the class originally signed up for.

We must have 3 students enrolled to keep a class open, if we need to close a class due to low enrollment, you will be given other class options.

## 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 (one 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.

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!

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.

In inclement weather, summer or winter please make sure and check Facebook or our website for closings.

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.

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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: \_\_\_\_\_  
*(Street) (City) (State) (Zip)*

PHONE: \_\_\_\_\_

PARTICIPANTS 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: \_\_\_\_\_  
*(Street) (City) (State) (Zip)*

PHONE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE (only if participate is under 18): \_\_\_\_\_ I HAVE READ THIS RELEASE

DATE: \_\_\_\_\_