**Island Gymnastics and More**



Registration

**We’re really glad you’re here, thanks for choosing Island Gymnastics!**

***How did you hear about us?******□ Friend\* □ Shore Update □ Instagram/Facebook***

***□ Internet Search □ Walk-in******\* Referred by (name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Family Last Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Zip** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact #1 First Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Parent/Guardian)**

**Primary Phone Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact #2 First Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Parent/Guardian)**

**Primary Phone Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Student #1*

**Student’s First Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_

**Student Gender­­­** **□male □female** **Birth Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(mm/dd/yyyy)**

**Attends School At** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grade Level** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Restrictions** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of Class**, **Day & Time** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Student #2*

**Student’s First Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_

**Student Gender­­­** **□male □female** **Birth Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(mm/dd/yyyy)**

**Attends School At** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grade Level** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Restrictions** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of Class**, **Day & Time** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUIRED POLICIES, AGREEMENTS, AND CONSENT**

**Hereinafter**, “Island Gymnastics and More” means Island Gymnastics and More, LLC, a Maryland limited liability company; “I,” “my,” “you,” “your,” refers to the parent /legal guardian whose name is signed below; and “child/children,” “child,” “children,” “child’s/children’s,” “child’s,” “children’s” “student(s)” refers to the registered student, and if more than one student is registering with Island Gymnastics and More, then all of the registered students whose name(s) is/are written below.

**Assumption of Risk, Release of Liability, and Consent**

I hereby give permission for my child/children to participate in Island Gymnastics and More classes/events. My child/children is/are capable of participating in the sport of gymnastics and have had a physical examination from a medical provider within the last (12) twelve months. I consent to the enrolled child’s/children’s participation in gymnastics, tumbling, cheer activities and stunting, ninja, dance, and other programs. Any activity involving inverted movements, other movements, motion, jumping, flipping, rolling, running etc. involves the possibility of serious, permanent, or fatal injury. I understand the risks of participating in gymnastics, tumbling, cheer activities and stunting, ninja, dance, and other programs offered by Island Gymnastics and More, in consideration for allowing my child/children to use Island Gymnastics and More equipment and facilities, I hereby forever release Island Gymnastics and More, its owners, officers, employees, teachers, and coaches from all liability for any and all damages, illnesses, and injuries suffered by my child/children while under the instruction, supervision or control of Island Gymnastics and More, its owners, officers, employees, teachers, and coaches and/or whether or not under such instruction, supervision or control, while my child/children are on any premises or using any equipment owned or operated by Island Gymnastics and More. I have read this Assumption of Risk, Release of Liability, and Consent thoroughly. I understand this Assumption of Risk, Release of Liability, and Consent completely, and I sign it voluntarily as to its content and intent. I hereby give my permission for the registered student(s) to participate in classes/events held by Island Gymnastics and More.

**Infectious Disease or Illnesses Assumption of Risk, Release of Liability, and Consent.**

I understand that Island Gymnastics and More follows all reasonable and customary health and wellness measures by maintaining the cleanliness of its facilities in regards to reducing the spread of common viruses and infectious diseases. I understand that Island Gymnastics and More requires that ALL staff, volunteers, families, guests, and visitors maintain general and proactive sanitary measures and comply with any health and safety policies implemented by Island Gymnastics and More,including refraining from knowingly bringing any sick children, family members, or friends to the gym. I further acknowledge, understand, appreciate, and agree that my and/or my child’s/children’s participation may result in possible exposure to, and illness from, infectious diseases, including, but not limited to, MRSA, influenza, and any form of COVID. I understand that while particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I hereby forever release Island Gymnastics and More , its owners, officers, employees, teachers, and coaches from all liability for any and all damages, illnesses, and injuries suffered by me and/or my child/children due to infectious disease or illness of any kind, and I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of others, and assume full responsibility for and consent to my and/or my child’s participation in classes/events conducted by Island Gymnastics and More including any exposure to infectious disease or illness.I have read this Infectious Disease or Illness Assumption of Risk, Release of Liability, and Consent thoroughly. I understand this Infectious Disease or Illness Assumption of Risk, Release of Liability, and Consent completely, and I sign it voluntarily as to its content and intent.

**Medical Emergencies**

I understand that medical emergencies occur at any sporting facility. In the event of an injury, accident, or illness involving my child/children, I authorize Island Gymnastics and More to provide customary medical treatment, transportation to emergency medical facilities, and emergency medical services if warranted. I understand that I am responsible to carry my own accident and medical insurance covering my child’s/children’s medical expenses in such occurrences.

**Payment Policies, Tuition, Withdrawals, and Refunds**

Annual Registration Fees: Please be aware, that the annual registration fee has not yet been charged to your account. Once Island Gymnastics and More receives notification of enrollment, the yearly registration fee will be added to the charges. For your records the registration fees are $25 per student or family. I understand that I am responsible for the payment of fees and costs for all classes in which I am enrolling my child/children. I understand that Island Gymnastics and More does not offer tuition refunds for any reason. I understand that if my child is absent or does not attend class(es)/event(s) for any reason whatsoever, I am still responsible for the payment of tuition/costs for the missed class(es)/event(s). Tuition is due on the 1st day of each month for the calendar month in which class(es)/event(s) are registered and must be paid by cash, check, debit, or credit card not later than the 1st day of the month for your child to participate in class(es)/event(s) for that calendar month. Should you decide to withdraw your child/children from a previously registered class(es)/event(s), you must notify the owner/manager of Island Gymnastics and More LLC(verbally and though email)by the 20th day of the calendar month previous to the month for which tuition is due. If tuition is notpaid, and you have not notified the owner/manager of Island Gymnastics and More LLC(verbally and though email), or if your payment is not honored by your financial institution, you will be notified by email, all of your child’s/children’s registrations will be suspended, and other persons on the Island Gymnastics and More waiting list will be eligible to take your child’s/children’s place. If any of your personal checks are returned by your financial institution for any reason at all, all of your payments from then on must be tendered by cash or debit/credit card. All accounts are subject to a $25.00 late fee, a $25.00 returned check fee, and interest of 12% per annum on any balances due and unpaid after 30-days.

**Automatic Payment Policies**

By submitting my credit card information, through the secure, online registration process, I authorize Island Gymnastics and More to automatically charge my financial institution account on the 25th of each month for all tuition and costs due for each class(es)/event(s) my child/children are participating in during the following calendar month. I understand that I must notify the owner/manager of Island Gymnastics and More LLC(verbally and though email)before the 20th of the month for the calendar month of class(es)/event(s) from which I choose to withdraw my child/children. I furthermore understand, that if I do not notify the owner/manager of Island Gymnastics and More LLC(verbally and though email)by the 20th of the month, it will result in my financial institution account being charged for the up-coming month’s tuition and costs, and that Island Gymnastics and More will issue no refund.

**Year-round Enrollment**

I understand that Island Gymnastics and More offers monthly enrollment instead of sessions. I understand that monthly tuition is based on a 4-week month. If there are 3 classes in the month, Island Gymnastics and More will not provide any refund but may be offer an extra make up class should you request. If there are 5 classes in a month, Island Gymnastics and More will not issue an additional charge. I understand that it is my responsibility to notify the owner/manager of Island Gymnastics and More LLC(verbally and though email)when I want to end my child's/children’s enrollment. If I notify the owner/manager of Island Gymnastics and More LLC(verbally and though email) before the 20th of the month, my child/children will end class on the last day of that calendar month. If I notify the owner/manager of Island Gymnastics and More LLC(verbally and though email) after the 20th of the month, I will pay for an additional month’s tuition and costs, and my child/children will end class on the last day of the month following the month for which I submitted the withdraw request.

**Make Up Classes**

I understand that if my child will be missing a class and I would like the opportunity to make up the class, I must phone Island Gymnastics and More before the missed class to advise of my child’s/children’s absence. At that time, a make-up class may be scheduled depending on availability, and at the sole discretion of Island Gymnastics and More. Make up classes must be scheduled within two weeks of the date of or prior to the missed class. Students may make up class(es)/event(s) in any age and skill-appropriate class.

**Photo Release**

I understand that Island Gymnastics and More, occasionally takes photos or videos for promotional, social media, and advertising purposes. These photos/videos will not be used in conjunction with any of your child’s personal information including their name. I hereby authorize and give permission to Island Gymnastics and More, to use photographs, videos, and/or electronic likenesses of my child/children, in analog or digital format, (hereafter “promotional matter”). I hereby waive any right to inspect or approve finished promotional matter that may be used in conjunction with my child/children now, during my child’s/children’s registration, or after my child/children are no longer registered with Island Gymnastics and More, and whether such use is known to me or unknown. I further waive any right to royalties or any other compensation arising from or related to the uses of any promotional matter containing my child/children. By signing this Photo Release, I consent to and do grant my permission to Island Gymnastics and More to use such promotional matter containing my child/children in any publication, in print or digital, for direct circulation or online, including but not limited to websites, social media of all forms, and news releases promoting Island Gymnastics and More, and its activities. I do hereby forever release any and all claims against Island Gymnastic and More for the use of any of the promotional matter as described above. I have thoroughly and completely read this Photo Release, and I sign it voluntarily fully agreeing as to its content and intent.

Registered Student’s Name(s)­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Parent / Legal Guardian Signature Parent / Legal Guardian Printed Name Date

**(Rev 4)**