



# GLOBAL GYMNASTICS CENTER REGISTRATION FORM 2018-19

**STUDENT #1**Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Male / Female: \_\_\_\_\_  
(Last) (First)

Date of Birth: \_\_\_\_\_ School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Please list any information that would be informative to the Global staff, including (for example, allergies, asthma, physical or intellectual disabilities, orthopedic/back problems, medical related problems or other physical limitations), and provide a brief explanation.

\_\_\_\_\_

**STUDENT #2**Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Male / Female: \_\_\_\_\_  
(Last) (First)

Date of Birth: \_\_\_\_\_ School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Please list any information that would be informative to the Global staff, including (for example, allergies, asthma, physical or intellectual disabilities, orthopedic/back problems, medical related problems or other physical limitations), and provide a brief explanation.

\_\_\_\_\_

**PRINT** Parent/Guardian's Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email (for gym use only): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**BY SIGNING BELOW, I AGREE THAT THE INFORMATION ABOVE IS ACCURATE AND COMPLETE, AND AGREE TO THE FOLLOWING TERMS AND CONDITIONS.**

- I agree to keep all gym fees current. I understand that tuition is due regardless of attendance, and non-payment will result in loss of my child's spot in his/her class. *Tuition will not be prorated for missed classes.*
- I understand make-up classes are allowed but limited and must be scheduled in advance.
- I agree to keep Global Gymnastics informed of any adverse changes in my child's health.
- I agree to adhere to the rules and regulations of Global Gymnastics.
- I understand that Global Gymnastics staff will take photos/video of practices and events, and my child may appear in these photographs/video, which will be used for marketing purposes online and in print.

Parent/Guardian **Printed** Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# GLOBAL GYMNASTICS

## Minor Consent and Assumption of Risk Statement

Printed Name of Student(s): \_\_\_\_\_

Address of Student(s): \_\_\_\_\_

Printed Name of Parent or Guardian: \_\_\_\_\_

IN CONSIDERATION of being a student at Global Gymnastics, and being allowed to participate in gymnastics and/or cheerleading events and activities, the parent(s) and/or guardian(s) of the minor named below agree:

1. The parent(s) and legal guardian(s) consent(s) to and will instruct the minor participating in any gymnastics or cheerleading activity or event and regularly thereafter, that he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the instructor of such condition and refuse to participate.
2. Participant shall be instructed to and shall carefully review and follow all Global Gymnastics safety guidelines.
3. I/we fully understand and will instruct the minor participant that:
  - a. There are risks and dangers associated with participation in gymnastics and cheerleading events and activities, including but not limited to those of bodily injury, partial and/or total disability, paralysis and death;
  - b. The social and economic losses and/or damages which could result from those risks and dangers described above, could be severe;
  - c. These risks and dangers may be caused by the negligence of the participant or the negligence of others, and;
  - d. There may be other risks not known to us or not reasonably foreseeable at this time.
4. I/we accept and assume such risks and responsibilities for the losses and/or damages following such injury, disability, paralysis or death, however caused or alleged in whole or in part by the negligence of Global Gymnastics, other participants, coaches, owners, instructors, officials, sponsors, advertisers, and lessors of the premises used to conduct the event or activity and each of them, their officers, directors, agents, and employees.
5. I/we agree that this Consent and Assumption of Risk Statement covers each and every event or activity sponsored by Global Gymnastics.

**I/WE HAVE READ THE ABOVE WAIVER AND SIGN IT VOLUNTARILY.**

\_\_\_\_\_  
Parent or Guardian (Signature/Relationship to Student)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

### **PARENT WAIVER/ASSUMPTION OF RISK**

I understand equipment use is limited to registered students of Global Gymnastics Center. If I should need to enter the gym area to assist my child with a class or for any other reason, I accept and assume risks and responsibilities for the losses and/or damages following any injury suffered personally, however caused or alleged in whole or in part by negligence of Global Gymnastics, other participants, coaches, owners, instructors, officials, sponsors, advertisers, and lessors of the premises used to conduct the event or activity and each of them, their officers, directors, agents and employees.

PARENT NAMES (Print): \_\_\_\_\_

signature: \_\_\_\_\_ Date: \_\_\_\_\_