

The Gymnastics Revolution

"Setting Children on a course for tomorrow"

6714 White Dr. West Palm Beach, FL 33407

Phone: (561)848-4577 Fax: (561)848-3155 Thegymnasticsrevolution.com

Reg _____

Leo _____

Class _____

Day & Time _____

Yearly Registration Form 2011/2012

1 st Child's Name	Sex	Age	DOB	School name & grade
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2 nd Child's Name	Sex	Age	DOB	School name & grade
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3 rd Child's Name	Sex	Age	DOB	School name & grade
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Mother's Name	Address	City	Zip
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Cell Phone	Home Phone	Work Phone	Occupation	E-mail
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Father's Name	Street Address	City	State	Zip
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Cell Phone	Home Phone	Work Phone	Occupation	E-mail
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Emergency Contact: _____ Phone _____

Relationship to student _____

Physicians name _____ Phone _____

Student(s) Medical Insurance Provider: _____

Medical conditions/allergies: _____

Registration & Session Information

At The Gymnastics Revolution we provide year round recreational and competitive programs. Our payment schedules for different programs may vary. All recreational programs are provided on a 1st come 1st serve basis. Monthly fees must be paid **prior to the first of each month to ensure continued enrollment in your chosen class**. There is a \$10 late fee for paying after the 1st class of each month. Missed classes must be made up in the same month, unless it is the last class, which can be made up in the 1st week of the new month. We prorate monthly fees for **New students only, on their first month of taking class**. One free trial class is offered prior to enrollment. There are no free trials for tumbling classes, parkour classes or adult classes, and these trial classes are \$20 per class (\$40 for the 2 hour parkour class). We will make every effort to ensure your child is placed in a class and time that is acceptable to you. If we are unable to meet your expectations, we will gladly refund any tuition payments prior to the 2nd class after **initial** enrollment. No other refunds will be given.

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Registration & Session Fees for Recreational Classes

- There is a yearly registration fee that is due upon enrollment and annually (September) thereafter.
- Registration Fee(s): \$60/Student, \$115 for 2, and \$165 for 3 or more family members. We prorate throughout the year.
- All fees are non-refundable except as otherwise stated.
- There is a \$40.00 service fee on all returned checks – payable in cash only.
- All Special events require a minimum of 24 hour advance sign up. (Additional \$5.00 for signing up on the day of the event)
- All Recreation classes are monthly, which includes 4 classes and 30 day prior written notice is required before canceling any class. When there are 5 weeks in the month and you miss the 5th class, you DO NOT get to make up the 5th class.
- Adult classes are on a punch card system. You may purchase classes in a block of 5 classes for \$80 or 10 classes for \$130. Yearly registration must also be paid.

I have read and understand the Registration and Session fees for The Gymnastics Revolution and agree to follow these policies throughout the year. I understand that classes & prices are subject to change.

Parent /Guardian Signature: _____ Date: _____

How did you hear about The Gymnastics Revolution? _____

Member Enrollment Information

Read before signing! Acknowledgement of Policies, Risk and Waiver of Liability

I recognize that potentially severe injuries, including but not limited to permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to gymnastics, tumbling, trampoline, cheerleading, dance, ball sports, and martial arts. Being fully aware of these dangers, I voluntarily consent for my child/children to participate in all The Gymnastics Revolution programs and accept all risks associated with that participation. In consideration for allowing my child to use these facilities, I on my own behalf and the behalf of my child and our respective heirs, administrators, executors and successors, hereby forever release and covenant not to sue The Gymnastics Revolution, its officers, directors, share holders, employees, volunteers, and all others associated with the LLC from all liability for any and all damages and injuries suffered by my child or myself while under all instruction, supervision or control of The Gymnastics Revolution. I hereby agree to individually provide for all present and possible future medical expenses which may be incurred by my child as a result of any injury sustained while participating at or for The Gymnastics Revolution. I understand that The Gymnastics Revolution retains the rights to use any photographs, videotapes, motion picture recordings, or any other record of events for publicity, advertising, or any legitimate purposes. *The Gymnastics Revolution* reserves the right to cancel classes that do not have sufficient enrollment and transfer students. Additionally, I understand and agree to abide by the make-up policy.

I have read and understand this acknowledgment of policies, risk and waiver of liability and I voluntarily affix my name in agreement.

Parent Signature/

Date

Parent Signature/

Date