

Participation Registration Form

Welcome to Northwest Gymnastics Training Center (NGTC). We are excited to get started & look forward to building self-confidence, gymnastics skills, strength, flexibility, knowledge, competitiveness & friendships in a positive, disciplined, fun environment! All that remains is this simple registration form. Simply read & complete the entire form, then hand, fax or email to us!

Today's Date: ____/____/____ I Found Out About NGTC From: _____

Registration if for: Class Birthday Open Gym Field Trip Other

Athlete's Name: Last: _____ First: _____ Middle: _____

Birthday: ____/____/____ M__F__ Age ____ Grade ____ School _____

Father Name: _____ Mobile #: _____

Mother Name: _____ Mobile #: _____

Home Address: _____ City _____ State _____ Zip: _____

Home Phone: _____ Work Phone: _____ (Mom/Dad)

Emergency Contact Name: _____ Phone: _____

E-mail: (We send info about tuition reminders, camps/clinics, etc.) _____

Family Doctor _____ City: _____ Phone: _____

Medical Insurance Co. _____ Policy#: _____

Medical conditions, if any (including allergies and food/medication allergies): _____

Does your child take any regular medications? Please list _____

Please circle the appropriate response: My child is interested in: **Recreation Team/Competition Undecided**

Office use only: Start Date: _____ Session Cost: _____

Class Name: _____ **Days:** M__T__W__TH__F__S__ **Time(s):** _____

Paid: \$ _____ **CC** **Check** **Cash** **Other** **Balance:** \$ _____ **Receipt #** _____

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

In consideration in the participation in the NGTC Program, I represent that I understand the nature of this activity and I am qualified and in good health and in proper physical condition to participate in such activity.

I fully understand that this activity involves risks of serious bodily injury, including permanent disability, paralysis and even death which may be caused by my own actions, or inactions, those of others participating on the event, the conditions in which the event takes place, or the negligence of the "releases" named below: that there are other risks 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, cost, and damages I incur as a result of my participation in the activity.

I hereby release, discharge, and covenant not to sue Northwest Gymnastics Training Center, LLC. its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of the premises on which the activity takes place, (each considered one of the "releases" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by negligence of the "releases", or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of releases from a loss liability, damage, or cost, which any may incur as a result of such claim. Also, we do not hold spots, due to injury, for gymnasts, unless monthly tuition is continued to be paid. If you feel you need to stop participation, a 30 day drop notice is still required.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMTION OF RISK AND INDEMNITY AGREEMENT, 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.

I HAVE READ AND UNDERSTAND THE ATTACHED TERMS AND CONDITIONS LISTED HEREIN.

Parent/Guardian Signature

_____/_____/_____
Date

Please initial each section below

Enrollment Obligation

_____ Both Parent and Child understand that admission to NGTC is offered on a limited basis. As only a certain number of students are accepted each year, we ask that you make every effort to attend each class. If you are unable to make it periodically, we understand. However, we ask that you contact the office, so that we can plan the class accordingly. Make ups will be given for families with current tuition **only**. Make up classes cannot be used in lieu of tuition.

_____ Parent / Guardians are responsible for making tuition payments on-time and in-full on or before the 1st of each month. A late fee of \$25.00 will be charged to your account for all payments received after the 1st of the month. A \$25.00 service charge will be added for all returned checks. We do not provide billing statements. I understand that tuition is subject to change. However, changes will be posted at least 15-days prior to changes taking affect. Unpaid balances will result in your child being removed from class. A grace period of 10 minutes will be given for pick-up of your child. After 10 minutes, a charge of \$1.00/minute will accrue and be added to your account.

Required Behaviors

_____ NGTC reserves the right to remove or deny students/parents whose actions are deemed unruly and/or dangerous to others by the coaches and/or staff of NGTC. Those students/parents may not be allowed to participate in team or recreational classes offered by NGTC. I understand that if this rare occurrence should happen to my child; I will not be entitled to a refund, either partial or whole.

Drop Notice:

_____ **NGTC requires a 30-day drop notice.** This “intent to drop” form may be picked-up at the office. We require written notification so that we may make the necessary adjustments to the remaining class(es). NGTC does not provide refunds.

Agreement to Participate:

_____ I understand that gymnastics, like other situations and activities involving height and movement, involves a certain degree of risk and chance of serious injury. The participant named on this form has no known problems that might compromise his/her safety & the safety of others. Students will not be required/nor allowed to complete activities that they cannot complete in a safe manner.

_____ As a registered participant at NGTC, your child’s likeness and/or photo may be published on the official NGTC website, it’s official Facebook page(s), or in an occasional flier, handout or brochure. As a part of your registration, you agree that this is acceptable to you. Official NGTC photo Opt-Out forms are available in the office if you absolutely do not want your child’s photo used in any manner.

_____ Furthermore, for the safety of your child, classmates and coaches, I agree to be bound by the rules and regulations of NGTC and/or any host facility. **NO FLASH PHOTOGRAPHY ALLOWED.** NGTC reserves the right to refuse service to anyone.

_____ I understand that photo(s) or video(s) of my child or his/her likeness may be used by NGTC on our official websites and/or advertising. If you wish to Opt-Out, you will need to complete an Opt-Out form which may be picked-up in the office.

Waiver and Release:

_____ I am fully aware of the risks associated with gymnastics. These Risks may include catastrophic injury, paralysis and even death, as well as other damages and losses associated with your child’s activities. I further agree that NGTC, including its staff, owners, coaches and agents shall not be liable for any losses or damages occurring as a result of my participation in any activities at NGTC, except where such loss or damage is the direct result of the intentional or reckless conduction of one of the organizations or individuals identified above.

Permission for Medical Treatment:

_____ I confirm that the above named participant is in good health overall. I hereby authorize NGTC to administer simple first aid and / or customary athletic training attention. I also authorize a medical transport, exam, x-rays, or a medical / surgical diagnosis as deemed necessary by the participant’s physician or hospital.