



CHARTER OAK GYMNASTICS REGISTRATION

Home Phone: () _____ Cell Number : () _____

Mother's Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Work Phone: () _____ Occupation: _____ CDL# _____

Father's Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Cell Number:() _____ Occupation: _____ CDL# _____

(1) Student's Name: _____ Sex: _____ Date of Birth: _____ School: _____

(2) Student's Name: _____ Sex: _____ Date of Birth: _____ School: _____

(3) Student's Name: _____ Sex: _____ Date of Birth: _____ School: _____

E-Mail Address: _____

Special Needs: _____



Participant further permits Charter Oak Gymnastics to photograph and/or video tape for promotional use.

POLICY AGREEMENT

*I understand that my payment is due upon registration for every session. I can make payments in two installments (1st installment prior to the session starting and the 2nd session during the fourth week of classes).

*I understand that I will receive a written bill when my payment is late or my insurance fee is due.

*I understand that there are no refunds once a student starts their first class. If personal situations or injuries keep the student from attending more than 50% of the session, a credit can be given.

*I understand there are 2 make-up classes allowed on Fridays and must be scheduled by appointment only.

*Make-up classes must be completed within the current session.

*I must be currently enrolled to participate in a make-up class.

*There is a \$35.00 annual insurance/registration fee that must be kept current. This is a non-refundable fee.

**I have read and understand the above statements.

I give my permission and consent for a licensed doctor or physician to administer the necessary aid to my child(ren) _____ should he/she become injured or sick while in attendance at or while participating in any activity associated with Charter Oak Gymnastics., Inc. and do so without having to wait until I (we) are contacted.

Signature

Date

For office use only: 1. _____ 2. _____

WAIVER AND RELEASE OF LIABILITY

DISCLAIMER: CHARTER OAK GYMNASTICS, INC. IS NOT RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON WHILE PRACTICING, TAKING CLASS, COMPETING, PARTICIPATING IN OPEN GYM, BIRTHDAY PARTIES, OR IN ANY OTHER WAY INVOLVED IN GYMNASTICS, CHEERLEADING, OR PRESCHOOL CLASSES OR TEAMS AT CHARTER OAK GYMNASTICS, INC. FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF CHARTER OAK GYMNASTICS, INC., ITS OWNERS, OFFICERS, AGENTS, OR EMPLOYEES.

In consideration of my participation, I hereby release and covenant not-to-sue Charter Oak Gymnastic, Inc., the Charter Oak Gymnastics Board of Directors and officers, the Charter Oak Gymnastics Booster Club, and any of their employees, teachers, coaches, or agents, from any and all present and future claims resulting from ordinary negligence on the part of Charter Oak Gymnastics, Inc., or others listed for property damage, personal injury, or wrongful death, arising as a result of my engaging in or receiving instruction in gymnastics, cheerleading, or any other activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future that may be made by family estate heirs, assigns, or me.

Further, I am aware that gymnastics and cheerleading are vigorous sporting activities involving height and rotation in a unique environment and as such they pose a risk of injury. I understand that gymnastics, cheerleading, and related activities always involve certain risks, including but not limited to, death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and serious injury to virtually all bones, joints, muscles, and internal organs, and the mats, pits, and other safety equipment and apparatus provided for my protection including the active participation of a coach or teacher who will spot or assist in the performance of certain skills, may be inadequate to prevent serious injury. The risk of harm may be limited by all of the safety equipment and trained coaches, but never eliminated. I understand that participation in gymnastics, including moving from event to event, conditioning, stretching and other activities which may leave me vulnerable to the reckless actions of their participants who may not have complete control over their actions or who may not see other students in the gym. I am voluntarily participating in this activity with knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

I further agree to indemnify and hold harmless Charter Oak Gymnastics, Inc. and all others listed for any and all claims arising as a result of my engaging in or receiving instruction in Charter Oak Gymnastics, Inc. activities or any activities incidental thereto, whenever, wherever, or however the same may occur.

I understand that this waiver is intended to be as broad and as inclusive as permitted by the laws of the state of California and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be within the state of California.

I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and or remedies which may be available to me for the ordinary negligence of Charter Oak Gymnastics, Inc. or any person listed above.

Signature of Parent Date

Signature of Participant if over 18 Date

Check List:

Form complete	New family packet	Review make ups	Review tuition	Review dress code
Poster given Review	Tour of gym	Open Gym	Current Events	Reviewed w/ _____

PLEASE COMPLETE THE FOLLOWING

How did you hear about Charter Oak Gymnastics? Please circle.

Newspaper GTE Yellow Pages Clarke Yellow Pages Friend Direct Mail

Other _____