



8413 Pines Boulevard, Pembroke Pines FL 33024

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Recreational Classes Registration Form

Primary Phone #

Form with fields for 1st, 2nd, and 3rd Child Full Name, DOB, M/F, Class Day/Time, Parent/Guardian Full Name, and Email.

Form with fields for Address, City, State, and Zip.

Form with fields for License #, Employer, Work #, and Cell #.

Form with fields for Emergency Contact and Emergency #.

My child _____ has the following medical history and/or medical condition and/or medication regimen that Sunny Gymnastics LLC needs to be aware of:

Blank space for medical history and/or medication regimen.

I authorize Sunny Gymnastics to bill my credit card # _____ Type: _____ Exp./Date: _____ Sec./Code _____ for any current or past due balance on my account per the policies listed below.

I request Monthly Automatic Charge to my credit card on file ending in ____ _

I request 3 Month Plan Automatic Charge to my credit card on file ending in ____ _

Signature: _____ Date: _____

Sunny Gymnastics Policies

- 1. Tuition is due on the 1st day of the calendar month. A 10% Late Fee is added on the 6th of the month. Past due balances will automatically be charged to your credit card on file on the 6th of the month. Delinquent accounts will be reported with credit bureau.
2. Annual Membership Registration fee (\$40 or family \$60) and Tuition are Non-Refundable. Annual Registration fee will automatically be charged to your credit card on file on the 1st day of your renewal month.
3. A \$30 NSF will be charged on returned checks. A valid credit card is required for registration. There is a 3% processing fee if a refund situation should occur.
4. One make up class may be scheduled for every two missed classes. Make ups must be scheduled within 60 days of missed classes. Make ups cannot be done after you have dropped classes. Classes are held year round based on the Sunny Gymnastics Calendar. Make ups will be scheduled based on Sunny Gymnastics availability/schedule.
5. I understand and agree I am obligated to give "30 day written drop notice" on the 1st day of the calendar month prior to the month dropping. I agree to pay one-month tuition if written notice not given. This applies to ANY drop at ANY time. I understand there are NO exceptions to this policy. Drop notices are only accepted in person; no fax, email or postal service delivery will be accepted.
6. Account must be current in order for students to participate in classes.
7. Preschool parents are required to stay in the lobby while their child(ren) participate in class.
8. All parents must be in lobby to pick child up no later than 10 minutes prior to class ending. We are not responsible for your child once class is dismissed.

I understand participation in gymnastics involve motion, rotation, and height and carries with a risk of injury or death. I am voluntarily registering my child(ren) for this activity. I understand any medical expenses related from participation in these activities are my sole responsibility. I give permission to Sunny Gymnastics to use, without limitation of obligation, photographs, film footage, or tape recordings, which may include a families' image or voice for the purpose of promoting or advertising.

Parent/Guardian Signature _____ Date _____

Who should we thank for your referral? _____

PLEASE TURN OVER, READ, AND SIGN BACK

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT
("AGREEMENT")

In consideration of participating in the Sunny Gymnastics LLC, classes or special events, I represent that I understand the nature of this activity and that I am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity.

I fully understand that this activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the participant named below; and that there may be other risks either 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 Sunny Gymnastics, its respective administrators, directors, agents, offices, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors' of premises on which the activity takes place, (each considered one of the "releasers" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "releasers" or otherwise, including negligent rescue operation 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 the Releasers, I will indemnify, save, and hold harmless each of the Releasers from any loss, liability, damage, or cost, which any may incur as the result of such claim.

PARENTAL CONSENT

I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, understand the nature of the above referenced activities and the Minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION 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 further grant the Released the right to photograph and/or videotape me and/or my child or ward and further to display, use and/or otherwise exploit me and/or my child or ward's name, face, likeness, voice and appearance forever and throughout the world, in all media whether now known or hereafter devised. This includes all media without limitation.

Date: _____

Print Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian