



Last Name: _____ First Name: _____
Date of birth: _____ Gender: _____
Class ID: _____
Trial Date: _____ Start Date: _____
Total due: _____
Mailing address: _____ City: _____ Zip: _____
Email address: _____
Mother: _____ Occupation: _____
Father : _____ Occupation: _____
Home Phone: (_____) _____ Work: (_____) _____ Cellular: (_____) _____
Emergency Contact: _____ Relationship: _____ Phone: (_____) _____

AUTHORIZATION FOR EMERGENCY CARE

In the event that I _____, or _____ cannot be reached,
(guardian/parent) (guardian/parent)

In the event of a medical emergency; I authorize emergency medical professionals and, or a TRC Gymnastics employee to transport _____ to the nearest emergency medical facility where he or she can be treated by a medical doctor or dentist.

My health insurance is as follows:

Insurance Company: _____ **Subscriber:** _____

Policy or Group #: _____ **Phone # :** _____

My child has the following significant health history/ condition/ allergies:

Rules and Policies

1. Anyone arriving 10 minutes or later for class will be denied participation for that day. A make-up will be available.
2. We do not prorate for missed classes.
3. Anyone who misses 4 consecutive classes will be dropped from our program unless arrangements have been made with Front Desk.
4. Tuition is due by the 10th of each month. Accounts not paid by the 10th will be assessed a \$10 late fee. Any account that is 2 or more months behind will be suspended until paid in full.
5. Parents and siblings are not allowed anywhere in the gym during class instruction.
6. All clothing must be fitted in a way that it will not impede with gymnastics instruction.
7. Hair longer than the neckline must be tied back with an elastic band. (available at front desk)

• **I have read the rules and policies for TRC Gymnastics and agree to them**

• Date: _____ Signature: _____ Relationship to child _____

CHILD PARTICIPATION

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

In consideration of participating in the Gymnastics Class, Camp and/or Open Gymnastics Sessions 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 “releasees” 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 TRC Gymnastics Inc, its respective administrators, directors, agents, officers, 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 “RELEASEES” 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 “releasees” 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 the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any many incur as the result of such claim.

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.

Printed name of participant

Signature of participant

Date

PARENTAL CONSENT for Child Participation

AND 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 hereby Release, discharge, covenant not to sue and AFREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the minor’s account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor’s behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim. I understand that TRC Gymnastics utilizes security cameras and that all participants and visitors are recorded while on the premises.

Printed name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date

PARENT PARTICIPATION

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

In consideration of participating in the Birthday Party, Mommy & Me Class, Open Gymnastics Session, or other Special Event 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 “releasees” 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 TRC Gymnastics Inc, its respective administrators, directors, agents, officers, 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 “RELEASEES” 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 “releasees” 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 the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

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.

Printed name of participant

Signature of participant

Date