

TRC Gymnastics Inc.
722 Geneveive Street, suite L
Solana Beach, Ca 92075



TRC South Gymnastics Inc.
6474 Nancy Ridge Dr.
San Diego, Ca 92121

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: (____) _____ Mom Cell: (____) _____ Dad Cell: (____) _____
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.
2. TRC Gymnastics does not prorate for missed classes, nor do we offer make up classes. We do however offer additional classes during specific months of the year at no charge to clients in good standing.
3. Anyone missing 4 consecutive classes will be dropped from our program unless prior, written arrangements have been made.
4. Tuition is due by the 10th of each month. Accounts not paid by the 10th will be assessed a \$10 late fee.
5. There is a \$50 "annual" registration fee for each and every participant in our programs.
6. Parents and siblings are not allowed anywhere in the gym during class instruction.
7. All clothing must be fitted in a way that it will not impede with gymnastics instruction.
8. 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 TRC South Gymnastics agree to them

• Date: _____ Signature: _____ Relationship to child _____

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 AGREE 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 Inc. and TRC South Gymnastics Inc. 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 or TRC South Gymnastics Inc, their 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

The Rolling Company - Credit card Billing Authorization

I represent and warrant that if I am purchasing something or paying for a service from this facility or from other merchants through this facility that (i) any credit card or bank account draft (ACH Draft) information I supply is true and complete, (ii) charges incurred by me will be honored by my credit card company or financial institution, and (iii) I will pay the charges incurred by me at the posted prices, including any applicable taxes, fees, and penalties.

I hereby authorize (if online payment is made or auto-pay information is provided) this facility to charge my ACH draft, or credit card account. I understand that a 30 day written notice is required to terminate billing and **I am responsible for payment whether or not my student attends classes until I notify TRC Gymnastics Inc. or TRC South Gymnastics Inc. in writing to drop my student from class(es).**

Should I dispute a charge through my financial institution this will constitute a breach of contract possibly resulting in, but not limited to, penalties, additional fees, collection, legal action, and/or termination of any and/or all current and future services.

(This Policy Subject To Change Without Notice)

Signature: _____ **Date:** _____