

ALL AMERICAN GYMNASTICS

PLEASE READ BEFORE SIGNING

REGISTRATION: An annual \$60 Non-refundable Insurance Fee is due upon registration. Registration is from September till August of the following year. **For families with 2 or more enrollees, the Fee is \$85. SUMMER ONLY \$10 FOR 1 IN A FAMILY OR \$20 FOR 2 OR MORE** (There is a \$250.00 deductible on this insurance and it is the parents/guardians responsibility). Fee covers excess Medical Insurance and Registration processing.

TUITION: A Valid Credit or Debit card must be kept on file in the gym at all times. You may still pay by check or cash, but tuition is due by the first of every month. If the first of the month falls on a day we are CLOSED, payment is due before that day. If payment is not received by then All American Gymnastics will automatically charge your credit or debit card on file the following business day **THERE WILL BE NO EXCEPTIONS**. Any returned check will have a \$20.00 additional fee and the balance is to be paid in cash. **All team fees and class fees including tuition, registration, assessments, uniforms, and entrance fees, and COMMITMENT FEE are NON-REFUNDABLE. THERE WILL BE NO EXCEPTIONS. . THE MONTHLY TUITION IS THE SAME EVERY MONTH (REGARDLESS OF THE NUMBER OF CLASSES FOR THAT MONTH) After 15 days, any unpaid balance is automatically sent to collections and you are responsible to pay any additional fees incurred to All American. A penalty fee of \$25 will be applied to all transactions that fail due to insufficient funds on the first business day of the month.**

ATTENDANCE: If the enrollee misses a class, you can call to schedule a make-up **WITHIN** the month that was missed. If you miss your last class of the month, you have **2 WEEKS** into the new month to do a make-up so long as you are registered for that month. If you schedule a make-up and do not attend, you will lose that make-up unless you call to cancel. Days missed due to snow closings or other unforeseen causes will receive a make-up class **ENROLLEES MUST BE TAKING A REGISTERED CLASS IN ORDER TO DO MAKE-UPS. (TEAM MEMBERS DO NOT GET MAKE-UPS)**

WITHDRAWAL: All American requires a parent/guardian to give **2 weeks written** notice before withdrawing from the month. **Until written notice is given the parent/guardian is obligated to pay for the month. Our email address is allamerican19@optonline.net**

Gymnast Name: _____

Tuition Cost: _____

Name as it appears on card: _____

Card Type: Circle One VISA or MASTERCARD AUTO YES or NO
(CIRCLE ONE)

Card Number: _____

Expiration Date: _____ Billing Zip Code: _____

Cardholders Signature: _____

Z RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL/GROUP CONSENT AGREEMENT ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in any gymnastics/cheer activity ("Activity") at any time during the current calendar year I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of gymnastics/cheer Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe the conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) gymnastics/cheer ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES 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, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the All American Gymnastics, its administrators, directors, agents, officers, members, volunteers, team members, 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 I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT 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 litigation expenses, attorney fees, loss, liability, damage, or cost which may be incurred as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, 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: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: _____

PARTICIPANT'S SIGNATURE: _____

DATE: _____

Below section must be completed by Parent/Guardian/Group for any participant under the age of 18.

MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF gymnastics/cheer ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION 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 RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S 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 FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIMS AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR ANY COST THAT MAY OCCUR AS A RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): _____

DATE: _____