



## Registration Form-Tumbling Program

Today's Date: \_\_\_\_\_ Home Phone #: \_\_\_\_\_  
Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Cell #'s: \_\_\_\_\_  
Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Parent Names: \_\_\_\_\_  
Parent Driver Lic. #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
School Name: \_\_\_\_\_  
(Name of your everyday school)

### Class Fees:

**\$12.00 per class or \$40.00 a month for all star team members only; \$15.00 per class or \$52.00 a month for non-all star team members. Paying for the month in full reserves your spot in the class. If a class becomes full (10 gymnast) then paying weekly students will then receive a refund and have to leave the class. Paying monthly gymnast come first. Private lessons are \$28.00 an hour; 1/2 hour private lessons are \$18.00. Semi-private lessons (2 students) are \$20.00 per person an hour. Prices are subject to change. Call office for group rate discounts.**

Annual Registration Fee: \$ \_\_\_\_\_ Paid: (circle only) Weekly or Monthly

*Make all checks payable to "High Desert Cheer" or "HDC"-All returned checks are subject to a \$25.00 service fee!*

NAME OF RELATIVE OR FRIEND TO CONTACT IN CASE OF EMERGENCY: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Have you had any serious illness, surgery or injury? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, describe and give date: \_\_\_\_\_

Describe any problems or limitations (Past broken bones, pins or plates holding bones, back problems, etc...): \_\_\_\_\_

Do you take medication on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what? \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_ Membership or Medical Record Number: \_\_\_\_\_

Family Doctor or Clinic \_\_\_\_\_ Phone #: \_\_\_\_\_

I understand that there are risks of physical injury associated with, arising out of and inherent to the activity of cheerleading, stunting & gymnastics. In recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all rights and/or causes of action of any kind, including any and all claims of negligence, arising as a result of such activity from with liability could accrue to High Desert Cheer, its officers, agents, employees, instructors, subsidiaries, parent corporations and all affiliated entities (hereinafter collectively referred to as "HDC").

I hereby agree to release HDC and hold HDC harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in the program on behalf of the participant.

I am aware that this is a release of liability and acknowledgement of my voluntary and knowing assumption of risk of injury. I have signed this document voluntarily and my own free will in exchange for the privilege of participation.

If I am a minor, my parent and/or legal guardian has signed this document releasing HDC from any and all such liability described above and has acknowledged that I am knowingly and voluntarily assuming all risk of injury inherent to this activity.

The above named student has my permission to attend the HDC program. I warrant the above information is complete and correct. I hereby authorize the director or their agent to act in my behalf to provide emergency medical treatment. I further release the HDC of all liabilities associated with my child's attendance in the program.

**Parent/Guardian Signature:** \_\_\_\_\_

