

United Gymstars and Cheer ENROLLMENT FORM

Student Name _____ Age _____ Date of Birth ___/___/___ Male__ Female __
(Please Print) Last First

Student Name _____ Age _____ Date of Birth ___/___/___ Male__ Female __
(Please Print) Last First

Student Name _____ Age _____ Date of Birth ___/___/___ Male__ Female __
(Please Print) Last First

Father: _____ Employer: _____ Cell: _____
Last First

Mother: _____ Employer: _____ Cell: _____
Last First

Guardian: _____ Employer: _____ Cell: _____
Last First

Mailing Address _____
Street City State Zip

E- Mail Address _____ School Attending _____

CLASS NAME	CLASS DAY	CLASS TIME
1. _____	_____	_____
2. _____	_____	_____

Medical Insurance Company Name _____ Policy Number _____

Initial Below:

- ___ I understand that all fees are due by the **1st of each month**, and will continue until I **give a 30-day notice** to drop class. **These fees are incurred even if I do not attend.** *Nonpayment could result in child being removed from class.*
- ___ I understand that a late fee will be incurred if my tuition payment is not received on or before the 5th of each month.
- ___ I understand that the enrollment fee is effective for a year as long as I am currently enrolled and active in a class.

Waiver and Release of Liability:

In consideration of 2A Enterprises Inc. d/b/a: United Gymstars and Cheer furnishing training and/or equipment to enable me to participate in gymnastics/cheer classes, I agree as follows:

___ I fully understand and acknowledge that gymnastics and cheernastics activities have inherent risks, dangers, and hazards, and that my participation in such activities and /or use of such equipment may result in injury including, but not limited to bodily injury, strains, fractures, and other serious disabilities.

___ I, on behalf of myself, my personal representatives, and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless defend and indemnify 2A Enterprises Inc. d/b/a United Gymstars and Cheer and its owners, agents, officers and employees from any and all claims, actions or losses for bodily injury, property damage, wrongful death or otherwise which may arise out of my use of equipment or my participation in gymnastics or cheernastics activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts of other conduct by the owners, agents, officers or employees of 2A Enterprises Inc. d/b/a: United Gymstars and Cheer.

___ I understand and acknowledge that no medical insurance benefits will be provided to me during this activity, and that I will be responsible for any medical bills that may result from my participation in gymnastics and/or cheernastics.

___ I, being the parent or guardian of the student, do hereby authorize 2A Enterprises Inc. d/b/a: United Gymstars and Cheer, its coaches, trainers, or any member of its staff, to obtain emergency medical treatment from any physician, hospital, or other qualified medical personnel or facility as needed in the event of accident or injury. I also agree to be responsible for all the costs of said emergency treatment.

___ I, being the parent or guardian of the student, do hereby authorize my child's photograph to be used in advertisement for 2A Enterprises Inc. d/b/a: United Gymstars and Cheer.