

**ACTION GYMNASTICS SPORTSPLEX, INC.**  
**Registration and Liability Release Form**

STUDENT'S NAME (s) – ( Incomplete forms will not be accepted )

A. \_\_\_\_\_ Class Day / Time \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_

B. \_\_\_\_\_ Class Day / Time \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_

Parent (s) Name (s) \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City / State / Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone / Emergency # \_\_\_\_\_

**WAIVER AND RELEASE OF LIABILITY**

**DISCLAIMER:** ACTION GYMNASTICS SPORTSPLEX, INC. IS NOT RESPONSIBLE FOR ANY INJURY ( OR LOSS OF PROPERTY ) TO ANY PERSON WHILE PRACTICING, TAKING CLASS, COMPETING, PARTICIPATING IN OPEN GYM, BIRTHDAY PARTIES, GYMNASTICS CAMPS, OR IN ANY OTHER WAY INVOLVED IN GYMNASTICS, DANCE, CHEERLEADING, TUMBLING, TRAMPOLINE, FITNESS OR PRESCHOOL CLASSES OR TEAMS AT ACTION GYMNASTICS SPORTSPLEX, INC. FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF ACTION GYMNASTICS SPORTSPLEX, INC. ITS OWNERS, OFFICERS, AGENTS, CONTRACTORS, OR EMPLOYEES.

In consideration of my participation, I hereby release and covenant not-to-sue Action Gymnastics Sportsplex, INC., the Action Gymnastics Sportsplex, INC. Board of Directors and officers, the Action Gymnastics Parent Association, Action Cheer Booster Club, and any of their employees, contractors, teachers, coaches, or agents, from any and all present and future claims resulting from ordinary negligence on the part of Action Gymnastics Sportsplex, INC., or others listed for property damage or personal injury, arising as a result of my engaging in or receiving instruction in gymnastics, cheerleading, dance, fitness, tumbling, trampoline, or any other activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, or heirs.

Further, I am aware that gymnastics, cheerleading, dance, tumbling, trampoline, and fitness are vigorous sporting activities involving height and rotation in a unique environment and as such they pose a risk of injury. The risk of harm may be limited by all of the safety equipment and trained coaches, but never eliminated. I understand that gymnastics, cheerleading, dance, tumbling, trampoline, fitness, and related activities always involve certain risks, including but not limited to, neck and back injuries, injury to virtually all bones, joints, muscles, and internal organs, and the mats, pits, and other safety equipment and apparatus provided for my protection including the active participation of a coach or teacher who will spot or assist in the performance of certain skills, may be inadequate to prevent injury. I understand that participation in gymnastics, cheerleading, dance, tumbling, trampoline and or fitness, including moving from event to event, conditioning, stretching and other activities which may leave me and or my child or children vulnerable to the reckless actions of the other gym participants who may not have complete control over their actions or who may not see other students in the gym. I am and or I am having my child or children listed above voluntarily participate in gymnastics, cheerleading, dance, tumbling, trampoline, and or fitness with knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage or personal injury.

I further agree to indemnify and hold harmless Action Gymnastics Sportsplex, INC. and all others listed for any and all claims arising as a result of my engaging in or receiving instruction in Action Gymnastics Sportsplex, INC. activities or any activities incidental thereto, whenever, wherever, or however the same may occur.

I understand that this waiver is intended to be as broad and as inclusive as permitted by the laws of the state of California and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be within the state of California.

I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and or remedies which may be available to me for the ordinary negligence of Action Gymnastics Sportsplex, INC. or any person listed above.

Parent's, Guardian's or Legal Age Participant's Signature

Date

**PHOTO WAIVER**

I give Action Gymnastics Sportsplex, INC. permission to use my and or my children's images on print and or video for marketing and promotion purposes only.

Parent's, Guardian's or Legal Age Participant's Signature

Date

**AUTO PAY PLAN**

Automatic debit card, Visa or MasterCard credit card

**Cardholder's Name** \_\_\_\_\_ **Amount \$** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Card Number** \_\_\_\_\_ **Expiration** \_\_\_\_\_ **Visa or MasterCard** \_\_\_\_\_

I hereby authorize Action Gymnastics Sportsplex, INC. to charge my debit or credit card on the 25th of each month for monthly instruction services. I also authorize an annual membership fee of \$58.00 per family one time per year. I do understand that it is my responsibility to keep my card current, so in the event that any transaction is declined, I agree to pay a \$15 service fee. Furthermore, I do understand that it is also my responsibility to notify Action Gymnastics Sportsplex, INC. in writing of any class changes by the 25th of the current month to avoid additional charges for the next month of services. If my credit or debit card continues to decline as of the 1st of the next month of classes, that member will be marked as inactive until we are notified.

**Cardholder's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*\* PLEASE NOTE THAT WE TAKE CREDIT CARD SECURITY SERIOUSLY. ONCE A CARD NUMBER IS ENTERED INTO OUR SYSTEM, THE NUMBERS BECOME INVISIBLE AND THE ORIGINAL FORM IS KEPT IN OUR SAFE. FOR THE SAFETY OF OUR MEMBERS WE ALSO NOW HAVE 24 HOUR VIDEO SUR-*

**ACTION GYMNASTICS SPORTSPLEX, INC. POLICIES AND PROCEDURES**

**SAFETY POLICIES**

No unsupervised or loud children in the viewing area. No running, gymnastics or horseplay in the viewing area. No chewing gum, food or drinks in the workout area. Gym members with out the proper attire or with hair not properly groomed will not be allowed in class. If a member misses the warm up and stretch, they need to schedule a make up class. Parents of gym member minors need to come into the gym to pick them up. Gym member minors must be picked up promptly after their class ended or there is an extra fee.

**TUITION POLICIES**

An annual membership fee of \$58 is due every September. Our tuition schedule is based on individual members only. 20% discount for each additional family member. New members are welcome to join a class any time during the month or session at a prorated fee. Class tuition is charged automatically on the 25th of each month for the next month of classes. Once a member has enrolled, no refunds or transfers.

**MAKE UP POLICIES**

Make up classes are subject to availability. Make up classes are only available for currently enrolled. Make up classes need to be scheduled 24 hours in advance or you will be required to pay the gym class fee. Only one make up per month per student is available. Make up classes are on Friday classes only. No substitutions or exceptions. Make up classes can not transfer from month to month.

**TERMINATION NOTICE**

If you need to drop or change your child from a class, simply fill out a written change or drop notice which you can pick up at the office. Please submit the form by the 25th of the month to apply for the next month or quarter of classes. If we do not receive any notice and your child has discontinued our program, you will still be billed automatically. Thank you.

*By signing below I am acknowledging that I have read and understand all of the above policies and procedures.*

**Parent's, Guardian's or Legal Age Participant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_