



Form of Payment _____ Total Paid _____ Start Date _____ Class 1. _____ 2. _____
Student Payment: _____ (pro-rate) + _____ (monthly) + _____ (misc) - _____ (discounts) = _____
Sibling Payment: _____ (pro-rate) + _____ (monthly) + _____ (misc) - _____ (discounts) = _____

REGISTRATION FORM

Student's Name (First – Last) _____ Birth Date ____/____/____ Gender _____

Home Address _____ Home Phone _____

City, Zip Code _____ Mother's Cell _____

E-mail Address _____ Father's Cell _____

Mother's Name (First – Last) _____ Mother's Work Phone _____

Father's Name (First – Last) _____ Father's Work Phone _____

Nanny's Name _____ Phone _____

Emergency Contact _____ Phone _____
(Other than Names Above)

Pediatrician's Name _____ Phone _____

Dentist's Name _____ Phone _____

Medical Insurance Carrier _____ Policy Number _____

Student's Allergies _____

Student's Daily Medications _____

Other Medical Conditions or Previous Injuries _____

For Office Use Only: MB _____ RB _____ C _____



If you would like to enroll, please submit the following items immediately following this trial:

- √ Complete & Return an Enrollment Card
- √ Sign & Return a Policies Sheet
- √ Pay for the Remaining Lessons in the Month

____ *initial* *Without the above items, your child's space will not be saved.*

Release of Liability and Indemnity Agreement

I am fully aware of and appreciate the risks, including catastrophic injury, paralysis and death, as well as other injuries, damages, and losses that may result from participation in physical activities taught or conducted at Gold Star Gymnastics and on the equipment used at Gold Star, and travel related to such activities.

On my own behalf, on behalf of my representatives and heirs, and on behalf of my minor child or children, I hereby voluntarily agree to release, hold harmless and indemnify Gold Star Gymnastics, L.L.C., its officers, directors, agents and employees (hereinafter collectively "Gold Star"), from any and all claims for personal injury, property damage or wrongful death, and any damages resulting therefrom, that may arise out of, or are in any way related to, my participation in activities involving Gold Star and travel related to such participation.

To the extent I am signing this release on behalf of a minor child, I expressly represent that I am that child's parent or guardian and am authorized to sign this on their behalf.

I understand that this release is intended to discharge in advance Gold Star from and against any and all liability arising out of, or in any way related to, my participation in activities involving Gold Star, and related travel, even liability may arise from Gold Star's negligence, or other conduct by Gold Star. I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms. No other representations concerning the legal effect of this document have been made to me.

I have read and understand the terms of this release of liability and indemnification agreement, and I agree to be bound by its terms.

Child Participant's Name (Please Print)

Parent or Guardian's Name (Please Print)

Adult Participant's Name (Please Print)

Signature of Parent or Guardian on behalf of Child Participant or Adult Participant

Date

Permission to Render Emergency Aid

I, the parent or legal guardian of the above-named minor, fully understand that Gold Star Gymnastics, L.L.C. staff members are not physicians or medical practitioners of any kind. With the foregoing in mind and in the event that any kind of injury or illness should occur to my child while on Gold Star premises, I hereby authorize Gold Star staff members to render first aid as deemed necessary in their discretion and/or to seek medical assistance, including calling 911 or otherwise arranging for the transport of my child to an appropriate medical facility for treatment. Additionally, I hereby authorize any trained and licensed medical professional to administer emergency medical treatment to my child should injury or illness occur in my absence. I understand that Gold Star will make every effort to promptly notify me of any such emergency.

I have read and understand the above Permission to Render Emergency First Aid and I hereby give my express written consent to its provisions.

Signature of Parent or Guardian

Date

To Enroll

There are no registration fees, however a parent must fill out a permanent record card, pay tuition, sign the "Permission to Render Emergency Aid & Liability Statement", and the Policies Sheet to enroll their child in a class at Gold Star Gymnastics. Please notify the office of any changes to your contact information.

To Cancel Enrollment

We ask that parents submit a withdrawal card one week prior to their child's last class. Students who withdraw by the end of the month will not be charged for the next month. If a student withdraws mid-month, clients will receive a credit to the family account (or a refund) for all classes left in the month that are more than one week after the withdrawal card was received. Any make-up classes scheduled after the student's drop date will automatically be cancelled.

Tuition

Tuition is based on an average of four weeks per month. No additional charges will incur for those months with extra class days. Conversely credit will not be given for those months with less class days due to holidays. Please refer to our calendar of events for a complete list of holidays. Credit will not be given for missed classes. Please see our absence policy. Siblings will each receive a \$10.00 discount per child starting the first full month of enrollment. All additional siblings after the third child are half price.

Administrative Charges

Tuition is due before the first day of each month, after which a \$10.00 processing charge will incur. Bills are only sent to overdue accounts. Students will be automatically dropped from their classes if accounts become one month past due.

Payment Options

Gold Star accepts cash, personal checks, VISA, MasterCard, and can set up auto monthly credit card withdrawals. There is a \$20 fee on all returned checks.

Snacks

No food, drinks, or gum are allowed on the gym floor. When eating in the lobby, please help keep the area clean.



Absence Policy

We offer several ways to make up missed classes, although credit will not be given due to missed classes. Make-ups can be scheduled in advance in specific make-up classes or the week of the make-up in a same level class with openings. Students must be currently enrolled to schedule make-ups. All make-ups must be scheduled within the same school year as the absence (September-August). Make-ups for summer classes must be scheduled before the end of the same calendar year.

If a student misses class due to an injury and is under a doctor's care, please call the front desk to discuss options for holding your child's place in class without charge. However, we must have a doctor's note for the student to return to class.

Tardy Policy

We agree to supervise your children during their scheduled class times, but we do not have the staffing to supervise students outside of these scheduled times. Therefore, children who are dropped off more than 10 minutes before class or picked up more than 10 minutes after class will be charged a fee. This fee is \$10 for the first 10 minutes and \$1 for each minute after that.

Illness Policy

For the safety and well-being of everyone in the gym, please do not bring your children to class if they have had a contagious illness within the 24 hours prior to class (such as a fever, coughing, or vomiting). We offer extensive make-up options outlined in our absence policy.

Substitute Teachers

Although we always strive to provide your children with a consistent teacher, absences do occur. We will notify you if your child's teacher changes permanently, or if a long-term substitute is necessary.

Safety

Only registered students are allowed on the gymnastics floor. Children must be escorted into and out of the gym by an adult, and must be accompanied by a coach when on the gym floor. Students are not allowed to wait in the parking lot. Parents watch classes from the waiting areas, and are only allowed in the gym area when accompanying children enrolled in a Kinder Stars class, or during Birthday Parties. Gold Star reserves the right to remove students from the gym area if they are deemed to be a danger to themselves or others, arising from disobedient, defiant or disrespectful behavior. (Please ask for a copy of our discipline policy for more detailed information).

Attire

It is recommended that students wear a one-piece leotard, or a t-shirt and fitted shorts or sweat pants. Zippers, buckles, or buttons on the students' clothing should be avoided. Long hair needs to be secured back out of the student's face. No rings or other jewelry while in class. No shoes or socks on the gym floor, although footless tights are accepted. Clean, dry sneakers may be worn for cheer practices. All clothing must be appropriate for children (referring to style, slogans, and graphics). GSG is not responsible for lost or stolen items.

Star Weeks

Star Week occurs five times a year, and is designed to provide feedback and motivation as students move through the program. Preschool students are given a progress report and a ribbon indicating their level. Recreational gymnasts are given a poster, and then earn sticker stars to place next to the skills they have mastered.

Moving Up

When your child is ready to advance, the coach will give you a "Move-Up Card". Bring this card to the front desk and the staff will help you to enroll in the next level. Please understand that if a space is not available in the next level at a convenient time, you may put your child's name on a waiting list. Your child is then encouraged to remain enrolled and continue attending their current class until the staff notifies you of an available space.

I understand and agree to the above policies while my child is participating in any of the programs offered at Gold Star Gymnastics.

Child's Name

Parent or Guardian's Signature

Date