

Exceleration Tumbling and Cheer
Annual Registration Form

Registration Date:

Each student must pay a \$25.00 Annual Registration Fee before beginning any class. A \$25.00 Annual Fee will then be due with January tuition each year in which your student is enrolled. Siblings of an already registered family member pay a discounted rate of \$20.00. If a student enrolls in classes beginning in the months of July-December, registration fees will be pro-rated. Also, the Registration Form and Rules sheet must be filled out and signed by a parent before the student will be allowed to participate. If applicable, tuition will be pro-rated, for the initial enrollment month only. Periodic class testing will take place in each class and advancements are done on an individual basis. Your student will not have to wait for the rest of the class to move up. It is the parent's responsibility to update the office records with current phone numbers, emergency contact information and new addresses. It is also the parent's responsibility to check with the front office for tuition increases due to class change and/or advancements.

TUITION:

The Standard Rate and the Early-Bird Discount price cover 1 month of tuition. To receive the Discount Rate, tuition must be in our office by the 21st of each month for the 1 month session. Families with more than one child enrolled in tumbling and/or cheer, will be discounted at the following rate: 10% off second child, 15% off third child, 15% off fourth child, etc. Private lessons are not subject to discount. Please make your check out to Exceleration Tumbling and Cheer, and give it to your child's coach. Please write the name(s) of your participant(s) on your check. There is a \$25.00 charge for returned checks.

PAYMENT OPTIONS: (Please check your preference)

AutoPay: Your credit card will be charged the Early Bird Rate on the 21st of the preceding month. If the 21st falls on a weekend your card will be charged on the business day preceding that weekend. You must fill out an Autopay Authorization Form. It is your responsibility to let us know if your credit card or expiration date changes. If your credit card is denied for any reason, your autopay will be cancelled. If you decide to cancel your Autopay at any time you must notify Exceleration Tumbling and Cheer in WRITING before the 15th of the month.

Monthly Billing: Payment is due by the 21st of the preceding month. Payments received after the 21st of the month will be charged at the Late Rate.

PAYING by the LESSON:

Our monthly rates are set to give our customers a reasonable price on a monthly basis. If you would prefer to pay by the lesson, rather than by our monthly rate, the price is \$20.00 an hour. Paying by the lesson will NOT guarantee you a spot in the class and your child will not be on a class roll. We realize that vacations, etc. come up but our lessons and our books are set up on a monthly basis, so our enrollment is on a monthly basis. If you miss a class, you have 30 days to make-up the missed class. Make-ups will not be carried past 30 days.

Private Lessons: Any participant at Exceleration Tumbling and Cheer can take private lessons in gymnastics or tumbling, with an approved instructor. Private Lessons are arranged and scheduled with the instructor. Private lessons are 30 minutes to one hour. If you are not currently registered in a class at Exceleration, there is a \$15 Annual Registration Fee due before the first private lesson. *An Annual

Registration Form must be completed by all students not currently taking classes at Excecleration Tumbling and Cheer before the first private lesson.

STUDENTS WITH AN OUTSTANDING BALANCE WILL NOT BE ALLOWED TO PARTICIPATE

A. Tuition is considered Past Due after the 10th of each month and the Standard Rate applies.

PAST DUE TUITION:

B. There will be a \$5.00 service charge for each bill mailed regarding balances due.

C. Interest at the rate of 18% per annum will be charged on accounts that are 30 days past due.

D. If the account becomes delinquent, you agree to pay interest, court costs, attorney's fees, and all collection agency costs at an additional 40%.

I have read and agree to the above Rules and Policies in regards to make-ups and past due payments.

SIGNATURE _____ DATE _____

Drop/Refund Policy

MUST BE SUBMITTED IN WRITING:

2 Week Notice & Refunds: I understand that a Written, Paid 2 Week Notice is required to drop my student from his/her class. Informing the coach does not constitute "notice". We do not give refunds.

I have read and understand the Drop/Refund Policy

SIGNATURE _____ DATE _____

GYMNAST/TUMBLING WORKOUT APPAREL

- Jewelry constitutes a safety hazard and will not be allowed during class.

Workout apparel for girls consists of a leotard, or biker shorts with a tight fitting exercise top. Boys should wear clean T-shirts and shorts without zippers or belts.

- Girls with long hair must wear it tied back in a ponytail or in braids for safety.

- No gum or candy is allowed in the gym area.

DROP OFF: Students should arrive at the gym 5 minutes before class begins. Do not drop your gymnast off earlier than 10 minutes before class, as this represents a supervision problem for the coaches and the management.

Gymnasts are not allowed on the equipment before their class begins, or after their class ends. Students are also expected to leave the workout area immediately after class, and should be picked up within 15 minutes of class dismissal.

Gymnasts are expected to observe safety rules, use self-control, and be courteous at all times.

CANCELLING/REARRANGING CLASSES: It may be necessary during the year to cancel or rearrange your child's class time to accommodate a gymnastics meet or other special function. In certain cases, it

may be necessary to schedule this class for a different day or time, but this will only be as a last resort. Should attendance in a class drop to less than 5 students, we reserve the right to cancel a class.

SUPERVISION of NON-PARTICIPANTS: Children not participating must be responsibly supervised by a parent and seated in the Viewing Area. Please do not drop off non-participant children to “watch” their brother or sister participate in gymnastics. We are not going to “babysit” non-participants and should not be expected to do so. A fee will be applied to your account for all unsupervised non-participants.

OBSERVATION: We encourage parents and visitors to observe their child’s lesson only once a month. This allows for a quieter atmosphere with greater concentration. When observing please do not interact or comment to your child as it is distracting to the rest of the class.

During Exceleation Cheer and Tumbling events we often take pictures for our website or other marketing material. There may be opportunities for your children to be in some of our photos. By indicating your approval below you give permission for Exceleation Tumbling and Cheer to use pictures and/or video footage of your child/children and that you understand that there will be no compensation.

PICTURE/ADVERTISING WAIVER

I agree to let Exceleation Tumbling and Cheer use pictures and/or footage of my child(ren) ____

I would prefer that Exceleation NOT use pictures of my child(ren) _____

I HAVE READ AND UNDERSTAND ALL OF THE ABOVE RULES AND POLICIES AND I AGREE TO FOLLOW THEM.

SIGNATURE _____ DATE _____

EMERGENCY CONTACT INFORMATION

Father’s Name Place of Employment City Cell Phone #

Mother’s Name Place of Employment City Cell Phone #

Names of neighbors or relatives who may be contacted if parents are not available:

Name	Relationship	Phone/Cell Phone
1.	_____	_____
2.	_____	_____
3.	_____	_____

Does the student(s) have any medical problems or limitations of which our staff needs to know about?

YES NO If yes, please explain the condition(s) below:

How did you hear about us?

- Phone Book Mailer Flyer/Coupon
- Newspaper Word of mouth Website

We would like you to know that you have chosen the BEST for your child. Our tumbling/cheerleading program is both a recreational and a competitive program. When the time comes for your participant(s) to move to another class, we will approach you as the parent and make the recommendation. It is your choice whether or not you want to move your child/children up. Student advancement is done on an individual basis. Our Competition Cheerleading Squads' tryouts are in March. We encourage all qualified participants to tryout!

RELEASE OF LIABILITY WAIVER (FOR PARENTS/GUARDIANS)

Name of adult participant(s) _____ I/we, despite all reasonable precautions implemented for safety, am/are fully aware of and appreciate the risks, including the risk of catastrophic injury, as well as other damages and losses associated with participation in the programs or activities. I/we knowingly and willingly assume all such risks. Consequently, I/we hereby for myself, heirs, executors and the administrators, do waive and release any and all rights and claims for damages against the owner, operators, coaches and other members of Exceleation Tumbling and Cheer from personal injury or accident of any sort or nature suffered by me/us, the undersigned, by reason of participation or membership in classes, lessons, or any programs or activities of Exceleation Tumbling and Cheer.

SIGNATURE

DATE

PARENT / LEGAL GUARDIAN PERMISSION AND RELEASE FORM

Last Name	Father's First Name	Mother's First Name	Home Phone
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Home Address	City	Zip Code	Email address		
Gymnast's Name	Age	Birth date	Sex	School Attending	Gymnastics Day/Time
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

The parent(s) or legal guardian(s) of the above named student(s) request Exceleation Tumbling and Cheer to teach physical developmental skills to the student(s) in group classes. Exceleation Tumbling and Cheer will provide facilities and faculty to teach these group classes using Exceleation Tumbling and Cheer methods and in accordance with gym policies.

Tuition for this service will be as per the schedule previously published and amended and available in the Office at Exceleation Tumbling and Cheer. I, as parent, (student), have read and understand Exceleation Tumbling and Cheer's policies and tuition rates.

In case of default in the payment of any amount due, Exceleation Tumbling and Cheer may declare the entire balance due and payable immediately and may bring legal action to recover any sums due here under. The undersigned will pay all costs of such recovery actions including interest, collection agency fees, and a reasonable attorney fee.

As Legal Guardian of _____, hereafter, child(ren), I recognize that potentially severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to tumbling, trampoline,dance, and cheerleading. Being fully aware of these dangers, I voluntarily consent the aforementioned person(s) participating in any and all, Exceleation programs, clinics, camps and activities and I ACCEPT ALL RISKS associated with that participation.

In consideration for allowing my child(ren) to use these facilities, I, on my own behalf and the behalf of my child(ren) and our respective heirs, administrators, executors and successors, hereby COVENANT NOT TO SUE and FOREVER RELEASE Exceleation Tumbling and Cheer and its officers, directors, shareholders, employees or agents from all liability for any and all damages or injuries suffered by my child(ren) while under the instruction, supervision, or control of Exceleation including, without limitation, those damages or injuries resulting from acts of negligence on the part of its officers, directors, shareholders, employees or agents.

In the event of an accident or emergency I would like my above mentioned child(ren) to be taken to a hospital for medical treatment and I hold Exceleation Tumbling and Cheer, and its representatives harmless in their execution of this matter. Additionally, I hereby agree to individually provide for all possible future medical expenses which may be incurred by my child(ren) as a result of any injury sustained while participating at or for Exceleation Tumbling and Cheer.

I have read and understand this ASSUMPTION OF RISK and WAIVER OF LIABILITY and MEDICAL AUTHORIZATION and I VOLUNTARILY affix my name in agreement.

I further certify that we have medical insurance coverage.

Signature of Parent or Legal Guardian

Date