AZ GOLD/FLAMES GYMNASTICS ACADEMY, INC.

9850 W. PEORIA AVE. PEORIA, AZ 85345 623-875-7777

Student:_____ M / F Date of birth:_____

Resp. Party:_____ __Mother __Father __Grandparent __Guardian

Address:_____
Street City Zip Code

Home phone#: ( )_____ Cell phone #: ( )_____

Mother: ( )_____ Father: ( )_____
work work

Emergency:( )_____ _____ e-mail _____
Number(s) Name(s)

Medical Conditions:_____ Physician: ( )_____

Medical Consent and Release of Liability

As legal guardian of _____, I understand that the sport of gymnastics involves certain inherent risks including the possibility of serious injury or death. In consideration of my child's participation in the activities including but not limited to gymnastics classes, tumbling, cheerleading, trampoline, karate, private lessons, clinics, open gym, dance lessons, competitions, team work-outs, or any special events of AZ Gold Gymnastics and/or Flames Gymnastics Academy, Inc. I am also aware that participation in day camps involves transportation to and from various field trips and as a result my child could be injured or killed in a vehicular accident. I do hereby agree to hold free from any and all liabilities, claims, damages, injuries, or losses, AZ Gold Gymnastics and/or Flames Gymnastics Academy, Inc., its respective owners, officers, employees, members, and the owner of the property where the business is being carried out and due herby for myself, my heirs, executors, and administrators release and forever discharge all rights and claims for damages which I or my child may have or which may hereafter occur to me or my child arising out of or connected with me or my child's participation in any of the activities of AZ Gold and/or Flames Gymnastics Academy, Inc. Also, any costs incurred including but not limited to: medical treatment of any type, costs for any medications, ambulance expenses, therapy of any type, costs for 'pain and suffering', liability, punitive damages, costs incurred for loss of work due to injury, or for loss of work for transporting and/or caring for an injured child, etc. As a part of taking class at AZ Gold Gymnastics and/or Flames Gymnastics Academy Inc. my child's picture may be taken and used on AZ Gold Gymnastics and/or Flames Gymnastics Academy Inc. websites, advertisements, or on a poster within the lobby.

I hereby grant my consent for AZ Gold Gymnastics and/or Flames Gymnastics Academy Inc. and any of its officers or agents to provide emergency medical care if necessary to my above-named child. This includes, but is not limited to: the services of a physician and/or Emergency room if considered necessary by the staff of AZ Gold Gymnastics and/or Flames Gymnastics Academy Inc. I also agree to assume responsibility for any and all expenses incurred for the emergency medical treatment of my child.

_____ _____ _____ _____
Signature: Parent or Guardian Relationship Date Hospital Preference

PLEASE REVIEW & SIGN ON REVERSE (except Open Gym)

Flames/AZ Gold Policies

When you register your child for class, you 'are paying for your child's place in that class, NOT their attendance. We at Flames cannot be responsible for every child's attendance. Please do not ask us to prorate, refund, or carry forward fees for classes missed. Call us if you are having schedule problems, and we will do our best to help. Parents of all levels -from our littlest to our top level gymnasts -are more than welcome to stay and watch their child from the upper viewing area (please do not gather at the main front entrance). Please refrain from yelling, coaching, or gossiping while in the viewing area. We at Flames/AZ Gold strive to keep a positive atmosphere. Parents may be asked to leave if problems with behavior arise. Your help in keeping our gym environment "fun-loving" is greatly appreciated.

Make-up Policy

We do not promise or owe make-up classes. However, we will do our best to get your child scheduled into another class of the same level if room is available. All scheduled make-ups *MUST* be attended within the following 4-week session with a maximum of 1 make-up per session. Please do not come for a make-up class without scheduling it in advance with the office. Missed classes may not be used towards waiving tuition.

Late Fees

ALL tuition payments are due on or before the 1st of each month. *All accounts* 7 *days late will pay* a *$10 late* fee.

Family Discount

We offer a $5.00 discount per session for each additional family member enrolled. (Exception: there are no family discounts for Team Members.) Annual registrations are not discounted for additional family members. .

Registration

A registration fee of $35 per student is due when a student first signs up for classes. This date becomes the student's registration anniversary date. A reminder will be sent each year. Registration is required of all students, including those taking only private lessons.

****** All checks returned by the bank will be charged a $40 service fee ******

Please sign to acknowledge that you have read and agree to our financial policies:

Name: _____ *Date:* _____

7/29/2008