

# CHAPEL HILL GYMNASTICS

7405 Rex Rd, Suite 207 • Chapel Hill, NC • 27516 • (919) 942-3655  
Summer Flex & Fun Registration Form (June 5 – August 26, 2017)

## STUDENT INFORMATION

\_\_\_\_\_  
STUDENT NAME (1)                      SEX              AGE              \_\_\_\_/\_\_\_\_/\_\_\_\_              DATE OF BIRTH              \_\_\_\_\_  
GYMNASTICS GOALS

\_\_\_\_\_  
SCHOOL ATTENDING              GYMNASTICS CLASS NAME              MEDICAL CONDITIONS (IF ANY)

\_\_\_\_\_  
STUDENT NAME (2)                      SEX              AGE              \_\_\_\_/\_\_\_\_/\_\_\_\_              DATE OF BIRTH              \_\_\_\_\_  
GYMNASTICS GOALS

\_\_\_\_\_  
SCHOOL ATTENDING              GYMNASTICS CLASS NAME              MEDICAL CONDITIONS (IF ANY)

[ ] Please check here if you are a returning member & the information in the box below has not changed. You may skip to the Waiver.

## PARENT/RESPONSIBLE PARTY INFORMATION

\_\_\_\_\_  
STREET                      CITY                      ZIP                      \_\_\_\_\_  
HOW YOU HEARD ABOUT US

\_\_\_\_\_  
PARENT/GUARDIAN NAME              HOME PHONE              WORK/CELL PHONE

\_\_\_\_\_  
PARENT/GUARDIAN NAME              HOME PHONE              WORK/CELL PHONE

\_\_\_\_\_  
EMAIL ADDRESS                       E-Mail     Mail     Phone  
Preferred Means of Communication

## ACKNOWLEDGEMENT OF RISK, WAIVER OF LIABILITY, MEDICAL RELEASE

Please read before signing below

As legal guardian of \_\_\_\_\_, I recognize that potentially severe injuries, including but not limited to permanent paralysis or death can occur in any activity involving contact sports, height or motion, including but not limited to use of all Olympic events (vault, bars, balance beam, floor exercise, and trampoline), plus other various training devices including the tumble track, training mats, training pits, and climbing rope.

In consideration for allowing my child to use these facilities, I hereby forever release CHGym LLC., dba Chapel Hill Gymnastics, or dba Chapel Hill Martial Arts, its owners, employees, teachers, coaches, volunteers, and all others associated with the corporation from all liability for any and all damages and injuries suffered by my child while participating in the programs of Chapel Hill Gymnastics or Chapel Hill Martial Arts, including transportation to and from activities, and I do further expressly covenant and agree not to sue any of the above for any such injury or alleged liability.

I acknowledge that gymnastics and karate are strenuous, physical sports, and I certify that my child is in good health and physical condition and is fully able to participate in the programs of Chapel Hill Gymnastics and Chapel Hill Martial Arts, and will maintain that physical condition so long as he/she participates in the programs.

Should my child become ill or injured while participating in an authorized gymnastics or karate activity and I and/or my child's guardian(s) are not available, I hereby grant any administrative director, staff person, agent or employee of Chapel Hill Gymnastics or Chapel Hill Martial Arts the authority to obtain the emergency medical attention they deem necessary. As legal guardian of the aforementioned person, I hereby agree to individually provide for all possible future medical expenses which may be incurred by my child as a result of any injury sustained in training or performance for Chapel Hill Gymnastics or Chapel Hill Martial Arts. I have read and understand this acknowledgement of risk and waiver of liability and I voluntarily affix my name in agreement.

I further agree to abide, and to see that my child abides by all rules, regulations, and policies of Chapel Hill Gymnastics and Chapel Hill Martial Arts. I have read, fully understand and will voluntarily sign the Acknowledgement of Risk, Waiver of Liability and Medical Release as stated above.

Parent or Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Chapel Hill Gymnastics  
Summer Flex & Fun Policies and Procedures 2017**

**Registration:** A non-refundable membership fee of \$15 is required for each *new* student enrolling for the Summer Flex and Fun term. The membership is valid until August 27, 2017.

**Payment of Fees:** Tuition is due in full at the time of registration. Additional classes may be added at a later date.

**Missed Classes and Make-ups:** As a courtesy to our customers, make-up classes may be taken for missed classes. Make-ups must be scheduled with the office to ensure space for your child. *Make-ups are limited to 2 per term and must be within the Summer Flex & Fun term.* Account credit may be issued for the remaining classes in the term due to extended illness or injury. Please inform the office immediately should this occur.

**Refunds:** No refunds will be given for missed classes. If a student is unable to attend their Summer Flex classes, make-ups will be offered to account for the difference. Chapel Hill Gymnastics reserves the right to terminate lessons to any student without notice. In such a case, a refund for unused lessons will be given.

**Returned Checks:** A fee of \$25.00 will be charged for any checks returned by the bank for any reason. This fee applies to electronic and paper checks, and electronic credit/debit payments.

**Extreme Weather, Substitutions or Unexpected Interruption of Classes:** If the school must cancel classes due to extreme weather or events beyond our control, the student will be entitled to make up that class at a later date. Make-ups must be scheduled with the office to ensure space for your child. No refunds for lessons missed due to these reasons will be given. The school reserves the right to provide a substitute teacher if the regularly scheduled teacher is ill or otherwise unable to teach classes. If feasible, the school may also combine two classes for that lesson.

**Dress Code:** Appropriate gym wear must be worn to all classes. A leotard for girls is preferred, but shorts and a t-shirt are acceptable. For male gymnasts, shorts and a t-shirt should be worn. Students are not permitted to wear jeans or jewelry, and long hair must be tied back for all classes.

**Parents' Responsibility to be Aware of Dates and Events:** It is the responsibility of the parent or adult student to be aware of all school activities and dates the school is open or closed. The school will post all such notices at the school, on the school website, and send appropriate notices home with the students. It is the responsibility of the parents or adult students to inform the school of any e-mail, address or telephone number changes. **Note: There will be no classes on Tuesday, July 4.**

**Care of Students:** The school is not responsible for providing before or after class care for students. Students are not to be left at the school for excessive time before or after class. CHG reserves the right to charge \$1/minute to students who are not picked up within 10 minutes after the end of their class. Siblings of students must be supervised by the parent/guardian at all times while in the building and are not allowed in the gymnastics area or on any equipment.

**Injuries:** Parents, legal guardians of minor students, and adult students waive the right to any legal action for any injury sustained on school property resulting from normal gymnastics activity or any other activity conducted by the students before, during, or after class time. School waiver must be electronically agreed to via our online parent portal or a completed and signed copy must be on file with the office prior to the start of classes.

**Photo Release:** CHG is hereby granted permission to take photographs of the students to use in brochures, websites, posters, advertisements, and other promotional materials. Permission is hereby granted for the school to copyright such photographs in its name.

**Gym Rules:** Only registered students accompanied by an instructor are permitted to enter the gymnastics area. Parents and siblings are not allowed on the gym floor or instruction areas.

**I have read and understand the above policies and procedures and agree to abide by them.  
I understand that this agreement will stand until August 27, 2017.**

Student Name(s): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Summer Flex & Fun Payment Agreement**  
**7405 Rex Road, Suite 207 • Chapel Hill NC • 27516 • (919) 942-3655**

**Family Information**

\_\_\_\_\_  
 Student Name (1)

\_\_\_\_\_  
 Class Name

\_\_\_\_\_  
 Student Name (2) (Receives Prorated Discount)

\_\_\_\_\_  
 Class Name

<i>Class</i>	<i>12 week Summer Term</i>	<i>Per Class</i>	<p align="center"><u>Summer Flex &amp; Fun Term</u>            June 5 - August 26</p> <p>Annual Membership Fee (\$15 per student): _____</p> <p>Membership privileges effective through August 27, 2017</p> <p>Summer Flex Class Tuition: _____</p> <p align="right"><b>Total Due:</b> _____</p> <p>Paid: _____ Method: _____ Date: _____</p>
Parent and Tot	\$186	\$15.50	
Preschool	\$216	\$18.00	
Kindergarten	\$234	\$19.50	
Super Boys (Beginners)	\$234	\$19.50	
Elite Boys (Advanced)	\$234	\$19.50	
Tumbling	\$234	\$19.50	
Rising Stars (Beginners)	\$234	\$19.50	
Shooting Stars (Intermediate)	\$234	\$19.50	
Super Stars (Advanced I)	\$234	\$19.50	
Shining Stars (Advanced II, 90 min/week)	\$324	\$27.00	

**Summer Flex and Fun Schedule**

Please circle the days on which you will attend class. Tuition is prorated based on a 12-week term and the number of classes selected.

Please note: There will be no classes on Tuesday, July 4, 2017.

<b>Week</b>	<b>Days Attending</b>					
June 5 – June 10	M	T	W	Th	F	S
June 12 – June 17	M	T	W	Th	F	S
June 19 – June 24	M	T	W	Th	F	S
June 26- July 1	M	T	W	Th	F	S
July 3 – July 8	<b>M</b>	N/A	W	Th	F	S
July 10 – July 15	M	T	W	Th	F	S
July 17- July 22	M	T	W	Th	F	S
July 24 – July 29	M	T	W	Th	F	S
July 31 – Aug 5	M	T	W	Th	F	S
Aug 7 – Aug 12	M	T	W	Th	F	S
Aug 14 – Aug 19	M	T	W	Th	F	S
Aug 21 – Aug 26	M	T	W	Th	F	S