

ADGC FALL 2010/ SPRING 2011 REGISTRATION FORM

Appropriate fees MUST accompany this form for it to be valid

FAMILY INFORMATION			
FAMILY LAST NAME		DAD'S FIRST NAME	MOM'S FIRST NAME
STREET ADDRESS OR P.O. #		DAD'S WORK #	MOM'S WORK #
CITY	ZIP CODE	DAD'S CELL #	MOM'S CELL #
E-MAIL ADDRESS:		HOME TEL #	EMERGENCY NAME AND TEL#

STUDENT #1 INFORMATION	
LAST NAME	
FIRST NAME	
BIRTHDATE	AGE ON ENROLLMENT DATE
Medical info	

GYMNASTICS CLASS DESIRED	DAY	TIME
PRESCHOOL GYM (Mom/Pop/Tot & 2½-3½ classes)		
TUMBLING GYM (Lil' Jumpers up to Flippers classes)		
BOTH GYMS (Lil' Tumbler classes)		

STUDENT #2 INFORMATION	
LAST NAME	
FIRST NAME	
BIRTHDATE	AGE ON ENROLLMENT DATE
Medical info	

GYMNASTICS CLASS DESIRED	DAY	TIME
PRESCHOOL GYM (Mom/Pop/Tot & 2½-3½ classes)		
TUMBLING GYM (Lil' Jumpers up to Flippers classes)		
BOTH GYMS (Lil' Tumbler classes)		

PLEASE TURN FORM OVER, READ, AND SIGN



ADGC REGISTRATION FORM (side 2)
PARTICIPATION AGREEMENT, RELEASE, AND ACKNOWLEDGEMENT OF RISK

In consideration of the services of Amarillo Developmental Gymnastics Center, here in after collectively referred to as ("ADGC"), their agents, owners, officers, employees, and all other persons or entities acting in any capacity on their behalf, I hereby agree to release and discharge ADGC, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

I understand and acknowledge that the activity my child is about to engage in poses known risks and unanticipated risks which could result in injury, paralysis, death, emotional distress, or damage to my child, to property, or to third parties. **The following describes some, but not all, of those risks:**

Gymnastics entails certain risks, which simply cannot be eliminated without jeopardizing the essential qualities of the activity. Without a certain degree of risk, gymnastics students would not improve their skills, and the enjoyment of the sport would be diminished.

Gymnastics exposes its participants to the usual risk of cuts and bruises. Other more serious risks exist as well. Traveling to and from shows, meets and exhibitions raises the possibility of any manner of transportation accidents. In any event, if you or your children are injured, you may require medical assistance, at your own expense.

I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, no one is forcing my child or me to participate, and we elect to participate in site of the risks.

I hereby voluntarily release, forever discharge and agree to hold harmless and indemnify ADGC from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with my child's participation in this activity.

Should ADGC or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and reimburse them for such fees and costs.

I certify that my child has health, accident and liability insurance to cover any bodily injury or property damage that may be caused or suffered while participating in this event, or else I agree to bear the costs of such injury or damage to my child. I further certify, that my child has no medical or physical condition which could interfere with my child's safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly by any such condition.

In event that I file a lawsuit against ADGC, I agree to do so solely in the state of Texas, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against ADGC on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

PARENT OR GUARDIAN'S ADDITIONAL INDEMNIFICATION
(Must be completed for participants under the age of 18)

In consideration of (print minor's name or names)

1 _____ 2 _____

("Minor") being permitted by ADGC to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless ADGC from any and all claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Signature of Parent or Guardian

X _____

Print Name _____

Date _____

ENROLLMENT FEES

Do not turn in this form without the appropriate following fees:

Gym registration fee: \$15.00 per student

First month's tuition: \$45.00 per student

Total: \$60.00 per student