



Office Use Only

Assessment Date: _____

F.T.C. Date: _____

Registration Date: _____

Entered in Jackrabbit by: _____

SPECIAL EVENTS WAIVER FORM

PARENT or GUARDIAN INFORMATION:

Name: _____ Name: _____

Occupation: _____ Occupation: _____

Home Address: _____ Home Address: _____

City: _____ State: _____ Zip Code: _____ City: _____ State: _____ Zip Code: _____

Home Phone: () _____ - _____ Cell: () _____ - _____ Home Phone: () _____ - _____ Cell: () _____ - _____

Work: () _____ - _____ Emergency: () _____ - _____ Work: () _____ - _____ Emergency: () _____ - _____

Email Address: _____ Email Address: _____

How did you hear about Golden State Gymnastics? _____

At the time of sign up how would you like to receive your statements? Paper or Email

STUDENT INFORMATION:

First Name: _____ Last Name: _____

Birthdate: ____ / ____ / ____ Age: _____ Grade: _____ School: _____

Previous Gymnastics Experience: _____

Years

Where

PLEASE CIRCLE: Gender: Male / Female Ethnicity: African American / Asian / Caucasian / Latino / Other

IN CASE OF EMERGENCY PLEASE NOTIFY (if parents cannot be reached):

Name: _____ Phone () _____ - _____ Phone () _____ - _____

Name: _____ Phone () _____ - _____ Phone () _____ - _____

EMERGENCY CONTACT INFORMATION:

Personal Physician _____ Phone () _____ - _____

Insurance Company _____ Policy # _____

Please describe any physical or mental impairment:

Currently on any medication? If yes, what: _____

Rules and Policies

Golden State Gymnastics is committed to providing a fun and safe environment in which students can learn and develop their talents. We have taken steps to ensure that this goal is met by selecting instructors that have years of experience in the sport of gymnastics - both as athletes and teachers. Our instructors are required to complete safety certification through USA Gymnastics and to undergo a background check and FBI fingerprinting. Finally, Golden State Gymnastics provides educational opportunities to our staff to ensure accurate, updated techniques are taught to your children. While these standards will help ensure a safe environment at our gym, we must also ask parents, friends and students to abide by our Rules and Policies.

Most importantly, no one is allowed on the gymnastics equipment or in the gym or play areas for the purposes of participating in the Golden State Gymnastics' programs without having this signed waiver form on file. Students are not permitted on any of the equipment before or after class time. Students must wait for their instructor in the lobby before entering the gym area.

MINORS: If participant is under 18 years of age, the signature of a Parent or Guardian is required.

Female athletes should wear either a leotard, or shorts and a t-shirt/tank top. Shorts and tops should fit snugly to their bodies (loose clothing may snag on the equipment). Their hair should be pulled up in a rubber band if shoulder length or longer. Please no socks or shoes on the equipment. Rings, jewelry, watches, friendship bracelets, etc. should not be worn during work-out. Stud earrings are permitted.

Male athletes should wear shorts and a t-shirt/tank top. Shorts and tops should fit snugly to their bodies (loose clothing may snag on the equipment). Their hair should be pulled up in a rubber band if shoulder length or longer. Please no socks or shoes on the equipment. Rings, jewelry, watches, friendship bracelets, etc. should not be worn during work-out. Stud earrings are permitted.

Thank you for helping us to provide a safe environment for your children by following these rules!

General Conduct

Parents, if you choose to leave the facility while your child is in class, please inform the Front Office Staff.

Otherwise, all parents and siblings must please wait in the lobby area during class. Please be respectful and allow the students and their instructors to work without distraction. We want our classes to be productive and efficient. The only exception is for the Parent-Tot classes. You will receive specific instructions from your Parent-Tot instructor on observation policies.

Gum, soda pop and food are not permitted in the gymnastics area. Water and sports drinks are allowed if they are in closed containers and away from the equipment.

No horseplay in the Gym.

Photo Release and Miscellaneous

I understand that my child's likeness/voice/image may be used by Golden State Gymnastics on their website, in programs or publications. I expressly release Golden State Gymnastics from any privacy, defamation, or other claims I may have arising out of this use.

PARKING AND SAFETY: Parents, please be mindful of arriving to class in time to find legal parking AND walk your child inside to get to class on time. Double parking in front of our building is ILLEGAL and UNSAFE at all times. PLEASE remember to carefully look for children, people, and other cars when entering and exiting the parking lot. Please respect our neighbors' requests for NO PARKING in their lots or BLOCKING of their driveways. Thank you for your cooperation.

LOBBY AREAS: Please be respectful of others by supervising your children in the lobby. Screaming and running through the lobby is not acceptable behavior. Please ask for help with the TV or water, if needed.

ANIMALS: Please leave your pets at home out of respect for others, especially children, who may have allergies to or fears of cats and dogs, etc.

LOST AND FOUND: Please regularly check the lost and found bin in the TV lobby for socks, jackets, toys, etc. We try to hang on to items for a least a few weeks before we put them in the PlanetAid.org bin in the parking lot. For smaller items like jewelry, sunglasses, cameras, or cell phones, please check with the office.

Payments

Your Monthly Tuition is due on the 25th of the month prior, and is considered late after the 1st of the month. There is a \$15.00 late charge if payment is received after the 1st. For your convenience, we accept Visa, MasterCard, American Express and Discover.

Automatic Credit Card Payment is offered to help you avoid the \$15.00 late charge. If you are interested, please ask the office how you can sign up.

Registration Fee: There is a one-time initial registration fee of \$30.00 per child.

Refund Policy: No refunds or credits will be given after the free trial class other than for the 100% Satisfaction Guarantee. We are a non-profit program and in order to maintain the affordability of the program, we strictly adhere to this policy. The registration fee is

non-refundable under any circumstances.

Gym Closures: The gym is closed for classes on the following holidays: Memorial Day, Fourth of July, Labor Day, Thanksgiving Day and Christmas Eve Day through New Years' Day. Monthly tuition is based on the concept of a 4-week month. The assumption is that a child will stay enrolled throughout the year. Not all months have 4 weeks - some have 5. We do not charge extra for the 5th class, nor do we give refunds, credit or adjustments for those rare times when a month may have only 3 classes because of a holiday or special event.

Drop Policy: If for whatever reason you or your student chooses to discontinue their gymnastics classes, please inform the front office staff so that we may prevent unnecessary billing. If you are dropped due to non-payment and you choose to re-enroll within the same month, we may charge a \$15.00 class reinstatement fee.

By signing this document you acknowledge that you have read and understood all parts of this form. There are no exceptions.

Authorization of Consent to Treatment of a Minor

I/We, the undersigned parent(s) or guardian(s) of the above-registered student(s), a minor(s), do hereby authorize Golden State Gymnastics as agent for the undersigned, to consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by and is to be rendered under the general or special supervision of any physician and/or medical staff of St. Joseph Medical Center or closest emergency center whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

I understand that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of our aforesaid agent to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his or her best judgment may deem advisable.

This authorization is given pursuant to the provisions of Section 258 of the Civil Code of California. This authorization shall remain effective until the student's membership terminates unless sooner revoked in writing to said agent.

Covenant Not to Sue for Injury or Damages

Notice: This is a legally binding agreement. By signing this agreement, you waive your right to bring a court action to recover compensation or to obtain any other remedy for any injury to yourself or your property or for your death, however caused, arising out of your use of the facilities of Golden State Gymnastics, now or in the future.

I hereby acknowledge and agree that the sport of gymnastics and use of the accompanying equipment has INHERENT RISKS. I have full knowledge of the nature and extent of all of the risks inherent in gymnastics and the use of the facilities of the GYM, including, but not limited to:

1. All manner of injury resulting from falling off of the gymnastics equipment, climbing ropes, trampolines, or any other area of the facility;
2. Cuts and abrasions resulting from skin contact on various surfaces and equipment;
3. Failure of any equipment or part of the equipment;
4. Injuries occasioned by the other users of the GYM;
5. Injuries resulting from landing on the landing surfaces; and
6. Injuries to bones, joints, tendons or death.

I further acknowledge that the above list is not inclusive of all possible risks associated with the use of the GYM and that the above list in no way limits the extent or reach of this release and covenant not to sue. In consideration of my use of the GYM I agree not to claim or to sue for any injury or damages resulting from risks inherent in the gymnastics and physical activity that I will pursue in the GYM including but not limited to the risks that have been outlined above.

Release, Indemnification and Liquidation Damages

In consideration of my use of the GYM, I the undersigned user, agree to release on behalf of myself, my heirs, representatives, successors, executors, administrators and assigns, and HEREBY DO RELEASE Golden State Gymnastics, Inc. a California not-for-profit corporation, its officers, agents and employees from any cause of action, claims or demands of any nature whatsoever, including but not limited to, a claim of NEGLIGENCE, which I, my heirs, representatives, successors, executors, administrators and assigns may now have, or have in the future against the GYM on account of personal injury, property damage, death or accident of any kind,

arising out of or in any way related to my use of the GYM whether that use is supervised or unsupervised, however the injury or damage is caused, including but not limited to, the NEGLIGENCE of Golden State Gymnastics, Inc., its officers, agents or employees.

In consideration of my use of the GYM, I the undersigned user, agree to INDEMNIFY and HOLD HARMLESS Golden State Gymnastics, Inc., its officers, agents and employees from any and all causes of actions, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way relating to my use of the GYM. I hereby certify the following:

1. That I have full knowledge of the nature and extent of the risks inherent in the use of the GYM and that I am voluntarily assuming the risks. I understand that I will be solely responsible for any loss or damage, including death, I sustain while using the GYM and that by this agreement, I am relieving Golden State Gymnastics, Inc. of any liability for such loss, damage or death.
2. That I am in good health and that I have no physical limitations which would preclude my safe use of the facilities and equipment of the GYM.
3. That I have sufficient health, accident and liability insurance to cover any bodily injury or property damage I may incur while participating in this activity and to cover bodily injury or property damage caused to a third party as a result of my participation in this activity. If I have no such insurance, I certify that I am capable of personally paying for any and all such expenses or liability.
4. Should it become necessary for the GYM to incur attorney's fees and costs to enforce this agreement, or any portion thereof, I agree to pay all reasonable costs and attorney's fees thereby expended, or for which liability is incurred.

Agreement to Arbitrate

Notwithstanding all of the foregoing, I agree for myself, my heirs, representatives, successors, executors, assigns, and administrators that in the event that I seek damages or compensation for the negligence of the GYM or any of its officers, agents or employees, that, as my only remedy, I will submit my claim to legally binding arbitration. I understand that I will be bound by the decision of the court appointed arbitrator. I further understand that the GYM will be bound by the decision of the court appointed arbitrator. I further understand that, in the event of an arbitration hearing the GYM and I will be able to make oral presentations, call witnesses and be represented by legal counsel. I understand that if I am dissatisfied with the result of the arbitration hearing I may not pursue any other remedy against the GYM, legal or otherwise. I understand that the arbitrator's decision will be admissible in any subsequent proceeding concerning the dispute. This dispute settlement would take the place of any state or federal legal remedies.

**I recognize the dangers inherent with climbing and jumping activities. I am assuming the hazard of this risk upon myself because I wish to participate. I realize that I am subject to injury from this activity and that no form of pre-planning can remove all of the danger to which I am exposing myself.

**Policies subject to change.

Students Signature _____ Date _____

If participant is under 18 years of age, the signature of a Parent or Guardian is required

X _____ Date: _____
Parent or Guardian Signature