



**GYMNASTICS
PRIVATE LESSONS
BIRTHDAYS & CAMPS
PRIVATE GROUP EVENTS**

North Coast Gymnastics Academy 1710 Express Dr., Bellingham, WA 98229
E-Mail: info@northcoastgym.com Tel: (360)733-6969 Fax: (360)733-6193

REGISTRATION FORM

All participants engaged in an activity at North Coast Gymnastics Academy must have a Registration Form completed and on file with the NCGA Business Office before class or event participation. Return the Registration Form via e-mail to info@northcoastgym.com, by fax at (360)733-6193, or deliver to the NCGA Business Office.

Section 1: Family Information/Parent/Legal Guardian

Legal Guardian 1: _____ Relationship: _____ Phone: _____

Legal Guardian 2: _____ Relationship: _____ Phone: _____

Email: _____ Home Phone: _____

Address: _____ City _____ State _____ Zip _____

Emergency Contact (If Guardian Unavailable): _____ Relationship: _____ Phone: _____

Section 2: Student Information

1st Student: _____ Gender: _____ Birthdate: _____

2nd Student: _____ Gender: _____ Birthdate: _____

3rd Student: _____ Gender: _____ Birthdate: _____

4th Student: _____ Gender: _____ Birthdate: _____

Special medical conditions/allergies/restrictions/physical or mental disabilities/special learning needs (Please disclose for the safety of your child, other students, and staff): _____

Section 3: ASSUMPTION OF RISK, WAIVER OR LIABILITY

As legal guardian of the above named persons, 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 gymnastics, tumbling, cheerleading clinics, camps, private lessons, birthday parties, birthday party guests, field trips, group events, and stunting. Being fully aware of these dangers, I voluntarily consent to the aforementioned persons participating in any and all programs at North Coast Gymnastics Academy and I ACCEPT ALL RISKS associated with that participation. In consideration for allowing my child to use this facility, I, on my own behalf and the behalf of my child and our respective heirs, administrators, executors, and successors, hereby COVENANT NOT TO SUE and FOREVER RELEASE North Coast Gymnastics Academy, its officers, directors, shareholders, employees, or other representatives, whether paid or volunteer from all liability for any and all damages or injuries suffered by my child while under the instruction, supervision, or control of North Coast Gymnastics. I also understand that it is the parents responsibility to warn the child about the dangers of injury. The parent should warn the child according to what the parent feels is appropriate. North Coast Gymnastics Academy will only warn the child through safety messages and our teaching style and progressions. I also understand and give permission for photos and videos of my child to be used in print or broadcast media as deemed appropriate for the promotion of North Coast Gymnastics Academy.

Section 4: PERMISSION FOR EMERGENCY MEDICAL TREATMENT/MEDICAL INSURANCE

I confirm that my child is in good health and I have medical insurance for my child and will provide coverage while he/she is enrolled. I fully understand that North Coast Gymnastics Academy staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release North Coast Gymnastics Academy staff members to render temporary first aid to my child in the event of any illness or injury, and if deemed necessary by the North Coast Gymnastics Academy staff to seek medical help including the calling of an ambulance for said child should the North Coast Gymnastics Academy staff deem this necessary. Additionally, I hereby agree to individually provide medical expenses, which may be incurred by my child as a result of any injury sustained while participating at North Coast Gymnastics Academy.

Medical Insurance Carrier: _____ Policy Number: _____

Doctors Name: _____ Doctor's Phone: _____

Section 5: TUITION PAYMENT, ENROLLMENT, AND BILLING TERMS

I understand that North Coast Gymnastics Academy operates on a pre-pay/pre-register policy. I understand that tuition is due on the 3rd week of every month in order to hold/maintain my child's spot in class for the following month. If tuition is not paid during the 3rd week my child will be dropped automatically from the class by the computer program used by North Coast. All spots not paid for become available to open enrollment students during the 4th week of the month. I understand that North Coast Gymnastics provides one Saturday make up class per month for illness/injury/or gym closure days due to inclement weather. I understand that North Coast does not give refunds for any reason. All sales are final for any product and/or service purchases and/or provided by North Coast. Payment will be processed with the payment method/information I have chosen on this membership form that is kept on file with North Coast. I acknowledge that this authorization will remain in effect until I notify the North Coast Business Office that the authorization should be terminated. If for whatever reason payments cannot be processed and my account balance remains overdue; I acknowledge that my child's enrollment in class will be cancelled. I understand that I will be responsible for all cost incurred for collection of any delinquent payments, including but not limited to collection/attorney fees/court costs. I understand that monthly/session payment amounts may vary as classes are added or dropped and as other charges or payments are applied to my account. All students will be charged an annual membership fee of \$35.00 per child that will be due on the 1st of the month of my membership anniversary date with North Coast Gymnastics. North Coast reserves the right to modify the terms of this agreement with written notice.

For Competitive Team and North Coast Preschool students, monthly tuition is due on the 1st of the month. It is late on the 5th, at which time a late fee will be applied.

This document may be obtained from the North Coast Gymnastics Academy Business Office or downloaded from our website www.northcoastgym.com

I have read, understand and agree with the Terms & Conditions of North Coast Gymnastics Academy's Membership form.

SIGNATURE: X _____ DATE: _____

Parent or LEGAL Guardian Signature Required.