

Aug 2018-Jul 2019 Gymnastics & Cheer/Tumbling Class Registration Form:

Student Membership Information:

Date: ___ / ___ / ___

Student's First Name: _____ Last Name: _____

Birthday ___/___/___ Age: ___ (M)___(F)___ Grade ___ School _____

Home Address: _____ City: _____ State ___ Zip: _____

Parent or Guardian Information: Home Phone: ___ - ___ Text Phone ___ - ___

Mother's Name: _____ Work Place _____ Work Phone: ___ - ___

Mother's Cell Phone: _____ E-mail: _____

Father's Name: _____ Work Place _____ Work Phone: ___ - ___

Father's Cell Phone: _____ E-mail: _____

Emergency Contact Name: _____ Phone: _____

Physicians Name: _____ Phone: _____

Please list medical conditions, allergies, physical limitations, past injuries: _____

How did you hear about our programs? _____

This program requires a contracted tuition payment . Withdrawals are accepted with a 30 day notice.

PAYMENT OPTIONS: Monthly tuition is figured on an exact 4 week session. Parents have 2 payment options

1. Pay each 4 week session by bank draft (EFT) from your checking account - \$4discount per draft Y N
2. Pay each 4 week session before the 1st of each monthly by cash, check, or credit - not discounted Y N

The Registration Fee plus the full 1st months tuition is required to register. (4 week trial — tuition guarantee)

If applicable - the second month's prorated tuition is _____ (25% 50% 75% n/a)

Class	Day	Time	Start Date	Age	Mon Fee
Class 1					\$64 / \$48
Class 2					\$48
Class 3					\$48

Card# _____ V M D

Card mailing address and zip _____

Exp. Date: ___/___ Total Amount Charged: _____

Name on Card: _____ Charge Card Monthly Y N

Monthly Tuition Total

Total Tuition (1 month)	_____
Registration Fee \$50/family	\$50
Total Amount Due	_____

Please make checks payable to Perpetual Motion:

Submitting this application with payment for classes acknowledges your acceptance of all payment, refund and insurance policies at Perpetual Motion.

Mail to:
1452 E Brown School Rd
Maryville, TN 37804
(865)984-1253

OR Fax to:
865-984-9974

Form required for Bank or CC draft



Please read and sign the back of this form

Student's Medical Information:

Student Name: _____

Does the above named student take any medication?

NO YES Name of medication, dosage and reason.

Are there any allergies or health conditions we should be aware of ?

NO YES Please describe: _____

Does the above named student wear eyeglasses, contacts, hearing aids or dental appliances? NO YES Should they be worn during class and please describe: _____

Does the above named student have any physical conditions we should be aware of? NO YES Please describe: _____

Is the above named student covered by your personal accident insurance? _____. If yes please indicate the insurance company. Our student accident policy is secondary to each parent's primary policy. Our insurance company name is: _____

Please list all adults (other than parents) with permission to pick-up your child from class. We will not release a child to anyone not authorized by you to pick-up. We may ask for identification.

Name: _____

Phone #: _____

Name: _____

Phone # _____

Physician's Name: _____

Physician's Phone# _____ - _____

Permission to Treat (optional)

I hereby give my permission to trained medical professionals to administer emergency medical treatment to my child should an accident or sickness occur in my absence.

Parent or Guardian Signature Date

Parent or Guardian Signature Date

Release of Liability Waiver

FOR ANY STUDENT AND PARENT PARTICIPATING IN A GYMNASTIC ACTIVITY:

By the very nature of the activity, gymnastics & cheerleading carries a risk of physical injury. No matter how careful the gymnast and the coach are, no matter how many spotters are used, no matter what height is used or what landing equipment, the risk cannot be eliminated. The risk of injuries include minor injuries, such as bruises, and more serious injuries, such as broken bones, dislocations and muscle pulls. The risk also includes catastrophic injuries such as permanent paralysis or even death from landings or falls on the back, neck or head.

Gymnastics & cheerleading, or any activity that involves motion, rotation, and height in a unique environment, carries with it a reasonable assumption of risk. Perpetual Motion Gymnastics is bound by law to inform all participants and their parents or guardians of the risk involved in the activity of gymnastics. Anyone participating in the Perpetual Motion gymnastics or cheerleading programs (along with those legally responsible for the participant) must sign the notice on the application and must adhere to the safety rules governing the gymnasium. These rules are posted inside and outside the gymnasium, and a copy is sent with every confirmation letter.

In consideration for Perpetual Motion Gymnastics and cheerleading program acceptance of the applicant, and in consideration of the applicant's opportunity to improve gymnastic skills through the use of the staff, equipment and facilities, those legally responsible for the named enrolling student realize the risk of injury involved and hereby agree to assume the responsibility of such for said student and further agree to save and hold harmless the said school, its employees, and all others concerned, and to indemnify them against loss, intending to be legally bound, our signature is offered below.

FOR ALL STUDENTS ENROLLED IN CLASSES

I hereby grant to Perpetual Motion Gymnastics and/or its legal representatives and assigns, the irrevocable, absolute, and unrestricted right to use and publish the likeness, portraits, photographs, film or videos of my child, or in which my child may be included, for advertising purposes. I hereby release Perpetual Motion Gymnastics and its legal representatives and assigns from all claims, royalties, and liability relating to the use of said likeness, portraits, photographs or films/videos.

I understand and accept all enrollment conditions

Parent or Guardian Signature Date

Parent or Guardian Signature Date

Monthly 2017-18 SM Gymnastics - Tuition & Policies

Monthly Bank Auto Pay-Save \$4 per month	Fee	Additional classes / child	Fee
Monthly auto-pay—Single Class 45 min or 1 hour class	\$60/mon	Auto-pay each additional class	\$48/mon
Monthly auto-pay— Each additional sibling cost/class	\$48/mon	Auto-pay each additional class	\$48/mon
Monthly Non-Bank Auto Pay—Check/Credit/Debit	Fee	Additional classes / child	Fee
Monthly non-auto-pay - Single Class 45 min or 1hour class	\$64/mon	Non-auto-pay each additional class	\$48/mon
Monthly non-auto-pay—Each additional sibling cost/class	\$48/mon	Non-auto-pay each additional class	\$48/mon
Registration	Fee	Additional child per family	Fee
Annual membership Fee (non-refundable) -Due in August	\$50/family	<i>Annual membership Fee for siblings</i>	n/a

Registration is accepted by PDF email, fax, USPS mail, or in person (Monday through Friday 8:30am-3:30pm). You can now print the registration forms from our web site or fill the forms out during the first class. *Classes must be paid in full to hold your space in the classes of your choice. *No child will be permitted in class without full payment and a signed registration form. Monthly payments can be made through **Electric Funds Transfer** from your checking account, or by check or credit/debit card. *You may register for a class any time during the month. The fee will be prorated for the following months tuition payment. Please read the tuition and enrollment policies carefully. There is a \$25 charge issued on each check returned from the bank for any reason.

Refund Policy: Smoky Mountain Gymnastics has a “one month” satisfaction guarantee. The total tuition payment for the “first” 4 weeks of classes will be refunded if customer satisfaction is not met. A signed “**request for refund**” form must be presented to the instructor before or on the day of the 4th class. No refunds will be issued “**after**” the fourth class. The registration fee is applied to immediate expenses before children step into the gym, therefore, this fee is non-refundable. We can not issue refunds or credits for missed classes. Each spot in the class insures that the instructor and expenses for that class are met. Prices are set by the spot reserved, not by the actual attendance.

Make-up policy: We have a “no make-up” policy at Smoky Mountain Gymnastics to insure that each class will not be disrupted or over loaded. The instructor of a class may override this policy if adequate room is available. There are no credits or refunds for missed classes. All one day holiday closings (see calendar) may be rescheduled on an alternate day. Limited to one makeup per 4 week session.

General Policies: Every child under the age of 3 years must be accompanied by a parent or caregiver. Baby siblings are not permitted in the class with the parent or caregiver. Twins must have 2 participating adults. **Parents (other than mommy and me classes), guests, and siblings are not permitted in the gym during the scheduled child’s class for any reason. This is an insurance regulation.** Guests, siblings and parents must wait in the waiting room. *Fees and class schedules subject to change without notice. All collection costs will be charged to any past due account. Also, interest charges of 2% per month will also be added until obligations are met.

Monthly Session Dates: Aug 8/5-9/1 Sep 9/2-9/29 Oct 9/30-10/27 Nov 10/28-11/24 Dec 11/25-12/22
 Jan 1/3-2/2 Feb 2/3-3/2 Mar 3/3-3/30 Apr 3/31-4/27 May 4/28-5/25 Jun 5/26-6/22 Jul 6/23-7/20

Late Payment Fee: Gym & Tumbling tuition is due by the 25th of each month preceding the month of classes. A \$10 late fee is charged by the computer on the 10th day of the month for “each” past due class tuition.

Withdrawal Policy: Any child may withdraw or transfer from any “class” with a signed “**withdrawal/transfer form**”. Perpetual Motion requires a 30 day “**written, withdrawal notice**”. This form must be signed by both the parent and any Perpetual Motion staff member with a verification copy going to each. Please note the day of notification and the day of the final class on the form. Tuition, by this signed contract above, will be due during the 4 week notification period. We do hope your child will attend his last four classes before his/her withdrawal date. An automatic notice is put in after the four non-notice class absences. This means eight weeks of classes are due and payable to any parent who leaves the program without proper notice. No parent will be charged for more than eight consecutive absences. Smoky Mountain Gymnastics staff must know who is attending each class.

Parent Signature _____ Date _____ I have read and understand each policy.

Monthly 2017-18 SM Gymnastics - Tuition & Policies — Parent Copy

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