

Dynamics Gymnastics

2100 E Pythian Street

Springfield, MO 65802

(417) 890-0946

DYNAMICS GYMNASTICS REGISTRATION FORM

Students Name: _____ Birthday: ____/____/____ Sex: F M

Home Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ Email: _____

How did you hear about Dynamics Gymnastics? _____

PARENT/GUARDIAN INFORMATION

Mother's Name: _____ Work/Cell: _____

Father's Name: _____ Work/Cell: _____

Family Doctor: _____ Health Insurance Company: _____

Medical Conditions, if any: _____

TERMS AND CONDITIONS

***Please initial each line.**

_____ **DYNAMICS TUITION FEE** is payable on or before the 1st of each month. Tuition can be paid at the office via cash, check, Visa, MC, or by Discover cards. Tuition can be mailed to 2100 E Pythian St., Springfield, MO 65802. Please make checks payable to Dynamics Gymnastics. Tuition can be called in over the phone using a credit card number. **Automatic payment is on the 1st of each month by either credit card or the 5th by checking account.** Ask the office for more information. **Accounts that are 30 days past due are subject to being sent to a Collection Agency and you will be responsible for paying Collection Fees in addition to any balance you owe Dynamics Gymnastics.**

_____ **ANNUAL REGISTRATION FEE** is non-refundable and must be paid along with the first month's tuition for EACH student and is due each calendar year.

_____ **DROPPING CLASS** is permitted **only by filling out a form at the front desk before the 1st of the month** intended on dropping (telling a coach is **NOT** sufficient). Dropping will **NOT** reserve your class space. If class is not dropped before the 1st of the month, tuition is applied for that month.

_____ **TRANSFERRING CLASS** is available anytime throughout the year. Please contact the office to arrange transfers.

_____ **MAKE-UP CLASSES** There are **NO REFUNDS, DISCOUNTS OR PRORATES if the child is absent.** Contact the office to schedule a make-up class. Open gym can be used for a make-up, or a reduced rate for Parent' Night Out can be used for a make-up. Make-ups will not be scheduled if account is not current. **You can NOT use make-ups in place of paying for the following month or months of class.**

MEDICAL RELEASE FORM

- I give my approval for the above named student(s) participation in any and all activities of the Dynamics Gymnastics programs.
- I hereby forever waive, and forever release and discharge Dynamics Gymnastics, LLC and their officers, directors, employees and agents from all liability for any and all damages and injuries suffered by the participant in connection with said use of the aforementioned equipment, instructors and facilities.
- As a student or parent or guardian of a student, I understand that it is my option to consult a physician for assurance of proper health and have been encouraged to do so by Dynamics Gymnastics.
- I authorize the representatives of Dynamics Gymnastics to provide any emergency medical services that may be required due to an injury during any gymnastics activity at or for Dynamics Gymnastics.
- I understand that participation is entirely by my own choice and with the understanding that there are risks and the possibility of accidental injury, paralysis and even death in any activity involving unusual motion or height.
- Dynamics Gymnastics is not responsible, whatsoever, for anything that happens before or after the students designated workouts and/or classes.

I do hereby verify that I have read, understand & accept each of the above policies, terms and conditions shown by my signature below.

Signature of Parent/Guardian: _____ Date: _____