

Everest Gymnastics and Tumbling Center

How did you hear about us? _____

Family Name: _____

Contact #1 Name: _____ Relationship: _____

Home/Primary Phone:(_____) _____ Cell #:(_____) _____

Work/Other Phone:(_____) _____ Notes: _____

Email: _____

Contact #2 Name: _____ Relationship: _____

Home/Primary Phone:(_____) _____ Cell #:(_____) _____

Work/Other Phone:(_____) _____ Notes: _____

Email: _____

Home Address: _____

Emergency Contact(s) (Not Contact #1 or #2) _____

Student #1 Name: _____ Gender M / F Birthdate: _____

Allergies/Special Needs/Emergency Medications/etc. _____

Other Notes (skills, other things we may need to know, etc.): _____

Student #2 Name: _____ Gender M / F Birthdate: _____

Allergies/Special Needs/Emergency Medications/etc. _____

Other Notes (skills, other things we may need to know, etc.): _____

Student #3 Name: _____ Gender M / F Birthdate: _____

Student #4 Name: _____ Gender M / F Birthdate: _____

(Please initial one) _____ I will _____ I will not allow images of the student(s) listed above to be used on the Everest Gymnastics & Tumbling Center website and/or social media.

Agreement Tuition & Payment Policy

Each family is required to have credit card or debit card information on file for payment.

All registrations are first come first serve. The registration process is not a guaranteed spot in class until we've received payment.

You have the option to make payments as follows:

1. Credit Card payments in person or over the phone: VISA/ MASTERCARD/DISCOVER
2. Option of signing up for auto pay automatically have your credit card on file be charged the 1st of every month.
3. Cash or check (please make your checks payable to Everest Gymnastics and Tumbling Center and please note the student's name, class day, and time on the memo portion of your check). A \$35 NSF fee will be charged for all Non-Sufficient Funds.
4. You may mail payments to: Everest Gymnastics & Tumbling Center 310 E Jimmie Leeds Rd., Building 500, Galloway, NJ 08205
5. Online from our website - www.everestgymnastics.com (click on "returning customer login")

Monthly fees are posted on the first business day of the month and anyone on auto pay will have their payment processed on that same day. If you are not on auto pay, payment must be made no later than the 10th of the month. Any payment not received by the 10th of the month will be charged a \$25 late fee.

If you need to become inactive in the program, a Withdrawal Form MUST BE received by the 20th of the month prior to withdrawal. WE DO NOT ACCEPT WITHDRAWALS OVER THE PHONE. Withdrawal forms can be found at the front desk, or can be filled online <http://www.everestgymnastics.com/withdrawal-form.html>. Once a withdrawal form is completed, the gymnast's spot in class will not be held. If no withdrawal form is completed, fees are due for the following month.

_____ ***I understand and agree to the above payment information that relates to Everest Gymnastics & Tumbling Center.***

Assumption of Risk

I hereby consent to his/her participation in gymnastics, tumbling and trampoline, cheer, dance, birthday parties, special events & activities including inflatables, camps and any and all other programs offered by Everest Gymnastics & Tumbling Center. I understand that participation in any and all activities at Everest Gymnastics & Tumbling Center may result in unavoidable injuries including, but not limited to, muscle or other soft tissue strains, sprains and tears, broken bones, and severe injuries such as paralysis, permanent disabilities, or even death from various causes, known and unknown, which include, but are not limited to, the heights of the equipment and the body during certain movements, rotation of the body, and movement of the body, in a unique environment. I am fully aware of the inherent risks involved the activities offered by Everest Gymnastics & Tumbling Center, and the possibility of injury from participating in the aforementioned activities.

Release of Liability

In consideration for allowing my child to participate in activities offered by Everest Gymnastics & Tumbling Center, I, my heirs and assigns, next of kin, and all others acting on my behalf agree to waive any and all rights, claims, damages, actions, causes of action or suits of any kind or nature whatsoever which I have or my child has against Everest Gymnastics & Tumbling Center, or any agent, employee, representative or other acting on their behalf and to indemnify, defend and hold harmless Everest Gymnastics & Tumbling Center, or any agent, employee, representative or other acting on their behalf for any injuries suffered as a result of engaging in those activities offered by Everest Gymnastics & Tumbling Center. It is also my intent to release Everest Gymnastics & Tumbling Center, and any agent, employee, representative or other acting on their behalf from liability for ordinary or gross negligent conduct that may occur in the future and agree not to sue.

Should any part or parts of this agreement be held null and void, the gross balance of the gross agreement shall remain valid and maintain its full force and effect. This acknowledgment of risk and WAIVER OF LIABILITY has been read by me and understood completely and signed voluntarily. I am 18 years of age or older.

Medical Emergencies

I fully understand that the staff of Everest Gymnastics & Tumbling Center are not physicians or medical practitioners of any kind. With that in mind, I hereby release Everest Gymnastics & Tumbling Center to render first aid to my child in the event of any injury or illness, and if deemed necessary to call an ambulance which I agree to pay for. As a parent or legal guardian, I agree to provide health insurance for the minor child and/or guarantee payment of any medical expenses incurred as a result of training, performing, or participation in activities with Everest Gymnastics & Tumbling Center.

NOTE: If my child requires an inhaler to be brought to class, I understand I am required to stay with him/her or get a doctor's release.

Parent Signature: _____

Date: _____