**Gravity Registration Form**This form must be filled out in its entirety before any student may enter the gym-Updated May 25, 2022

Registration Date		Athlete BIRTH YEAR	
Stude	ents Last Name	Students First Name	
Stude (Include	ents Birth Datee year of birth)	School District	
Paren	nts Full Names		
Full A	Address of Studente town and zip)		
Cell F	Phone Number of Student		
Paren	nt Contact Information		
Emer	rgency Contact (name)	Emergency #(cell)	
Paren	nt Email Address		
1	I understand that participation in cheerleading, gyn above named person at his/her own risk.	nnastics and related activities involves the risk of injury or even death and I enroll the	
2	I agree to hold harmless Gravity and Staff for any i	njury incurred as a result of participation in cheerleading and/or gymnastics.	
3	I hereby state the above named enrollee has no physical or mental conditions that prohibit full, rigorous participation in cheerleading or gymnastics. I also understand that it is my responsibility to inform Gravity of any mental or physical condition that Gravity staff should be aware of in dealing with the enrollee during normal activities and/or in case of medical emergencies.		
4	I hereby state that the enrollee has individual health	n insurance.	
5	I understand that there is to be absolutely no jewelry worn in the gym. I understand that the taping of jewelry is also prohibited. Cheerleaders and gymnasts with jewelry will not be able to participate in class. The gym is not responsible for lost items. Participants must have short fingernails. Participants must be dressed in a manner to safely conduct cheerleading and gymnastic activities.		
6	I understand that no food or beverages may be brought into the gym. Water should be left in waiting room. I understand that there will be no gum chewing allowed in gym or waiting rooms.		
7	I understand that all-star teams & school teams will not have make up classes under any circumstances and tuition is always due at the first class of each session regardless of student attendance. Teams may not pro rate tuition. A \$10 late fee will be applied to all tuition paid after the 8 <sup>th</sup> of the first month in the session. Class students may have make ups in the current session. Tuition is non refundable and non transferable. Tuition is always paid in full by sessions. If sent to collections 30% will be added to your bill.		
8	I understand that all star teams have a separate team contract and credit card authorization to sign as well as this registration form. If the enrollee is an all star team member, I will read, sign and agree to those contracts as well.		
9	I understand that all star team members must also s	ign the credit card authorization form.	
10	I understand that the areas of Gravity Cheer have surveillance cameras.		
11	accidental insurance that will cover your child while	session at time of registration. Thus fee is incorporated into your tuition. This includes le attending Gravity and its related activities. Gravity provides secondary insurance. ate in Gravity activities. Registration fees are non refundable. School teams/Youth	

12 I understand that parents are not allowed in the gym under any circumstances. Parents are welcome to observe from waiting room.

teams using Gravity space understand that they are insured through their team/school/organization insurance first.

13	I understand that there are uneven surfaces in Gravity Cheer and all participants and spectators must be aware of their surroundings at all times.		
14	I understand all classes no matter what the original cost, are pro-rated at \$30 per hour (effective June 1 2022). Regardless of attendance or class, pro-rated rates are \$30 per hour.		
15	I am aware that Gravity does not have air conditioning inside the gym.		
16	I understand that there are many uneven surfaces at Gravity Cheer and all participants and spectators/visitors must be aware of their surroundings at all times.		
17	I understand that NO ONE, including Gravity Cheer can guarantee a covid free, virus free environment or any communicable disease and that all athletes are participating at their own risk.		
18	I agree that the participant will NOT attend any classes if they have a fever or have not been fever free for more than 24 hours. I understand that the staff at Gravity may take an athletes temperature at any time, ask a participant to wash their hands or remove a participant from class if they are not feeling well, have a fever or a cough.		
19	I understand that enrollee's photo may be taken and used in advertisement.		
20	I understand and accept all gym policies and enrollment conditions above.		
Date			
Parent na	name (Printed)	Parent Signature	
Student S	nt Signature		