

For more information: Carpenter Center, 116 Terry Blvd Gering, NE 69341 Phone: 308-635-8422 **<u>E-mail</u>: info@carpentercenter.us** carpentercenter.net

Gymnastics Registration Form

Beginner Class

Participant's Name			
Birthdate	Current Grade	Years of Experience	
Mother's Name	Father's Name		
Home Address		City	
State	Zip Code	E-mail	
Home PhoneCell Phone			
Alternate Cell	Work Phone		
Previous Tumbling,	Cheerleading, Gymnastics, Da	nce:	
In case of an emerg	gency other than the parent to	be notified is:	
Name	Relationship	Phone:	
Special Medical/Me	edication Conditions		
Insurance Informat	ion / Group Name		
Policy Holder			
	(Plaasa Tu	m (war)	

(Please Turn Over)

Beginners Gymnastics

Wednesday 4:00-6:00 PM

Adv. Beginners Gymnastics

Thursday 4:00-6:00 PM

Fees: \$45/ Month \$20 Registration Fee



Ask About Financial Aid

Payment: Cash_____ Check #____

Credit Card_____

Received by _____

Fin Aid Requested Y N

Fin Aid Application completed Y N

Prorated for month of _____ Amt\$ _

Child's Behavior- I understand I am responsible for my child's, siblings', and family member's behavior and safety while at the Carpenter Center premises, including parking lot, bathrooms, lobby, etc. I also understand that I am responsible for cleaning up after my child.

Tuition– I understand tuition is <u>due on the 28th</u> <u>prior to the month of participation</u>. Families with additional kids receive a \$5.00 discount for each child. There will be an additional charge of \$30.00 for NSF checks.

Registration and Fee -Fees **<u>MUST BE PAID on</u>** <u>**date of enrollment**</u> with a complete application.

Refunds– <u>There are no refunds, credits, or pro-</u> <u>rating of fees for missed days, holidays, class</u> <u>withdrawal, or dismissal. New enrollees can</u> <u>have the first month prorated but must pay the</u> <u>prorated amount plus the upcoming month in</u> <u>full.</u>

Waiver: Participation in physical activities involves certain risks, strains, exhaustion, joint injury, etc. The Carpenter Center will not be liable for lost or stolen items while program participants are using the community center facilities. I give my permission for the Carpenter Center, without obligation, to use any photographs, film footage, or tape recordings which may include my voice/image or that of my child for purposes of promoting the Carpenter Center programs. I, the undersigned, for myself and my heirs, do hereby release the Carpenter Center/Housing Authority of Western Nebraska/City of Terrytown and its employees, agents, volunteers, and coaches from any and all claims for injury, death, loss, or damage. I/my child may suffer as a result of my participation. Upon registering your child, there are no refunds.

Parent or Guardian Signature

Date

