







# REGISTRATION FORM

Date: \_\_\_\_\_

Date of Free Trial: \_\_\_\_\_

Registering for (which class): \_\_\_\_\_

## SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC AND ALL OF ITS AFFILIATES RELEASE FORM

Athlete Membership Agreement and Information: Fill in all blanks, submit forms for current season only, bearing original signature (copies/faxes are not accepted). **Please initial all agreement lines rather than using a checkmark.**

### AGREEMENT:

In consideration of my membership in "the entity" and all of its affiliates and my participation in the programs offered by "the entity" and all of its affiliates, events, and activities for which I agree to be bound by the following (initial each line):

\_\_\_\_\_ Eligibility: I agree to comply with the rules of "the entity" and all of its affiliates: readiness to Participate: I will only participate in those "the entity" and all of its affiliates, classes, events, competitions and activities for which I believe I am physically and psychologically prepared. Prior to participation, I will have to practice my exercises and will perform only those exercises which I have accomplished to the degree of confidence necessary to assure I can perform them by myself and without injury.

\_\_\_\_\_ Medical Attention: I hereby give my consent to "the entity" and all of its affiliates and/or the host organization to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation, and emergency medical services as warranted in the course of my participation.

\_\_\_\_\_ Waiver and Release: I am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death; as well as other damages and losses associated participation in gymnastics, tumbling, cheerleading, weight lifting, cardio training, dance, martial arts, activities and events.

I further agree that "the entity" and all of its affiliates and any sponsor of "the entity" and all of its affiliates events, along with the employees, agents, officers and directors of these organizations shall not be liable for any losses or damages occurring as a result of my participation in the event, except where such loss or damage is the result of the intentional or reckless conduct of one of the organizations or individuals identified above.

\_\_\_\_\_ I also know that I am responsible for a monthly tuition to be paid before the first of each month. This fee is based on a total seasonal fee that is made into monthly installments, not on a per class basis. I agree to automatically include a \$15 late fee for any payments made on or after the 7<sup>th</sup> of each month. **I understand that if payment is not paid by the 7<sup>th</sup>, my child's spot will be dropped.** I also realize that there is a \$25 fee for returned checks. I understand that "the entity" does not accept cash or checks for tuition payment after the 25<sup>th</sup> of each month.

\_\_\_\_\_ **MISSED CLASSES:** I understand that due to the full enrollment of each class, an unlimited number of make up classes in any class spot is not possible. One makeup class per month is permitted. We do not allow students to "jump in" to classes for make ups. This is to insure we maintain the proper ratios. Please see the office to sign up for make ups. You have to be currently enrolled in order to make up classes. We do not permit skipping payment in order to make up classes. There will be no refund for missed classes. Your student must be actively enrolled to participate in make ups.

\_\_\_\_\_ **MISSED PAYMENTS:** I understand that any tuition not paid by the 7<sup>th</sup> of the month will result in the dropping of my child from the class and their spot will be filled from our wait list. Rescheduling for a new class time slot or possibly entering a waiting list for an open class time may be required.

\_\_\_\_\_ **DROPPING CLASSES:** A drop form needs to be submitted by the 25<sup>th</sup> of the preceding month in order to drop classes. Please turn the form in to our office. If the form is not submitted by the 25<sup>th</sup>, I understand that I will be responsible for tuition payment for the full amount for the next month.

**FOR ALL ATHLETES UNDER THE AGE OF 18:** As legal parent or guardian of this athlete, I verify that I understand and accept each of the above conditions and hereby permit my child to participate in and all of its affiliates classes, events, competitions, and activities.

**PHOTO RELEASE:** As part of our activities, pictures and videos are often taken. Signing below gives us your permission to use these on our website and for promotional publications. Photos and/or videos may be used in local media transmissions, SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC promotional publications, on the SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC website, or in any other SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC medium.

\_\_\_\_\_ (Initial Here) I give my permission to use my child's picture or likeness and first name for SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC publications and website. I allow my child to be interviewed or photographed by local news media.

**Printed Name Parent/Guardian:** \_\_\_\_\_

**Signature Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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Date of Free Trial: \_\_\_\_\_

Registering for (which class): \_\_\_\_\_

## POLICIES AND PROCEDURES 2020-2021

**(TEAR THIS PAGE OFF AND KEEP FOR YOUR RECORDS)**

### **PAYMENT INFORMATION:**

**MEMBERSHIP FEES:** All new registrants will pay the membership or family membership fee. They are nonrefundable and nontransferable. \$70 single registration, \$90 family registration

**TUITION:** *Tuition in cash/check is due before the first of the month.* Invoices are mailed or emailed only to PAST DUE accounts. **A \$15 late fee will be added to your monthly tuition if it is not paid before the 7<sup>th</sup> of the current month, and if not paid after the 7<sup>th</sup> of the month your athlete will be dropped from class.** All NSF checks will receive a \$25 fee. If you refer someone to SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC, and they register and pay for classes, you will receive 50% off your next month's tuition, up to a maximum of \$50.

SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC offers automatic draft from debit/credit cards. Cash and checks for tuition payments are accepted in our office from the 1<sup>st</sup> through 25<sup>th</sup> of the preceding month, but not after the 25<sup>th</sup> of the preceding month. Online payments can be submitted any time throughout the preceding month, but must be completed by the last day of the month. The portal can be found on our website, <https://soarmoorgymnastics.com/>

**DROP POLICY:** A drop form is required to be turned in by the 25<sup>th</sup> of the preceding month in order to drop classes **Please turn the form in to the Front Office if you are planning on discontinuing your enrollment.** You will be responsible for any tuition fees charged while we hold your space in a class(es).

**GYM CLOSING POLICY:** Gym closings due to holidays will be posted on the main calendar on our website. Gym closings due to weather will follow the Iredell/Statesville school system, but if there should be any doubt, please call the gym, check our Facebook page or our website. Holiday closings will not be made up, as there are months where there are 5 classes in the month to make up for closures throughout the year.

**MAKE UP POLICY:** One makeup class per month is permitted. We do not allow students to "jump in" to classes for make ups. This is to insure we maintain the proper ratios. Please see the office to sign up for make ups. **There will be no refund or pro-rated fees for missed classes. You need to be currently enrolled in order to make up classes; you cannot skip paying for a month in order to make up classes.**

**INJURY POLICY:** "The entity" will need to be notified in writing about any previous injuries your children may have prior to attending class. This will give our instructors a chance to modify the lesson plan to accommodate your child's restrictions without having them "sit out" in some stations or events and losing valuable class time. Should we notice a prior injury with your child and not have a written note and you are not at our facility, our office staff will contact you via telephone to get your verbal consent and any information about restrictions before we can let your child continue with class. On major injuries, like concussions, please let us have a copy of the doctor's release form when your child is cleared to resume all gymnastics activities.

## **SOAR MOOR GYMNASTICS OF LAKE NORMAN LLC Rules & Policies and General Information**

### **Rules and Policies:**

- For the safety of the gymnasts please wear hair up and out of face. T shirt/tanks must be worn, no sports bras only.
- For the safety of the gymnasts no jewelry.
- No food or drink in the gym (this includes gum).
- Children will line up in lobby at the gym entry to wait for the instructor to call the class.
- No parents allowed in gym. There is a viewing area.
- Please feel free to talk to the coaches about how your child is progressing, but understand the instructor may have a class either directly before or after your child's class.

### **GYM CLOSINGS:**

The gym will be closed on the following days:

Thanksgiving - November 25-27    Christmas – December 23- Jan 3    Easter–April  
Memorial Day – May 31    Summer Break TBD