



2019/2020 Parental Consent & Medical Waiver Gymnastic Street Tumbling-Fitness-Parkour-Hip Hop

1) Activity Policy:

I understand that my son/ daughter/ self will be undertaking a street tumbling, dance, parkour and/or fitness program. As with any physical activity there is potential for injury. I have health and liability insurance sufficient to cover any personal injury or property damage I or my child may sustain or cause while participating in as a result of the program. I hereby waiver and release Studio 202, INC dba ACROFITNESS® (together with its affiliates, employees, consultants, agents, instructors and facility) and the other program participants from all rights, claims, liability, damages or injuries that might occur at the ACROFITNESS® studio or off site, during a class, during outdoor training or performances or otherwise as a result of this activity. I hereby indemnify them against all expenses, costs and losses, including reasonable attorney's fees and costs of suit that may arise with respect thereto.

2) Medical Policy:

Please be advised that if your son/ daughter/ self is currently under the regular care of a physician, has high blood pressure, is taking prescription medication, or has a history of cardiovascular, back, knee, or shoulder disorders, we will require a physician's note granting your son/ daughter/ self permission to participate in the program. It is your responsibility to inform our staff of all allergies, previous broken bones, sprained or strained muscles and ligaments or any medical condition that may change or put this participant at further risk. A doctors note is required to freeze an account (for medical leave) for any injury that will not allow your son/ daughter/ self to participate. There will be no monies refunded.

3) Classes, Payments & Tuition Policies:

- ACROFITNESS® offers trial classes for \$25 which must be accompanied with a signed waiver. Trial classes must be paid for prior to taking class. **PLEASE NOTE:** The trial class is **NOT** a free class. It is an opportunity to try our classes before committing to a registration fee and monthly tuition. It will not be applied at registration.
- In order to register for classes all students must fill out a registration card and medical waiver. The registration fee, first and last month pre-paid tuition must be paid for at the time of registration. (Because of the full seasonal commitment; ACROFITNESS® team members do not have to prepay their last month tuition, however non team siblings will need to pay their last months tuition up front.)
- The first month is the only month that can be pro-rated (if the student is starting mid-month.) The pro-rated fee is \$20 per class. The student may opt to either pro-rate or make up the missed class in one of the Friday make up days (whichever is more advantageous to the student.)
- ACROFITNESS® tuition is based on each class receiving 32 classes from the beginning to the end of the ACRO season. Tuition is conveniently broken down into 10 monthly installments.
- **I understand that a class withdrawal form is required one month prior in order to apply your prepaid last month tuition. Notices received after the 7th of the month will make you responsible for that months tuition, we will credit the following month with your last month's tuition. If we do not receive the class withdrawal form, you will be responsible for all month's tuition, regardless of your child's attendance and your last month payment will be credited to June. There are NO exceptions to this policy. All fees are non-refundable.**
- In order to maintain the quality of our classes with an appropriate instructor/student ratio, students can only make up their class in one of the monthly Friday make up classes. All 1-3 year olds may make up their class in any 1-3 class.
- If ACROFITNESS® is closed due to weather; students may make up their missed class in a scheduled make up class.
- All ACROFITNESS® students must wear clean **ADIDAS SAMBA/HOOPS MID** tennis shoes and fitness appropriate clothing.
- Jewelry, long fingernails and provocative clothing is not allowed. No zippers, buckles or anything that could harm another student or our equipment is allowed.
- Students more than 15 minutes late will be asked to make up their class in order to ensure they are properly warmed up and stretched.
- **TUITION: Tuition is due by the 7th of the month. ACROFITNESS® will be auto drafting all tuitions past due on the 10th of the month. Tuition received after the 10th of the month will have a \$10 late fee applied. All credit card transactions will incur a 4% convenience fee.**
- **ACROFITNESS® will not accept erratic payments for tuition. All tuition must be paid in full for the exact amount due. There is a \$25 non-sufficient fund fee for returned checks/declined credit cards. If we are forced to collect debt you will be responsible for any court or legal fees.**

4) Drop off/Pick up Policy:

- The parent or guardian is ultimately responsible for getting their child to and from their classes. Whenever we are able to we will provide an instructor at the front door, as a courtesy to help with the flow of the traffic. If your child is not ready at the front door when you arrive then you must circle around again.
- Please drop your child off 5 minutes before the start of class and pick up 5 minutes after the end of class.
- If you are using the drop off/pick up, your child needs to know your intentions and be informed to go immediately to the front door to look for you.
- Regardless of the convenience of our drop off, parents of younger children (ages 2-7) should always plan to come inside and get their children to and from their classes.

If you are running late a phone call at least 5 minutes before the class concludes will allow us to inform your child that you will be late. We do not allow any child, at any age, outside without a parent. Do not ask your child to run across the drive through to meet you in the parking lot or in the street. You must either park and come in to get them or go through the pick up line. If your child has any unsupervised (by a parent) wait time between classes they must use it as a study period by sitting at a table or at the homework counter or utilizing our *pay to play* in the jungle gym. Any child found running, misbehaving or being unruly in any manner will be escorted to the jungle gym, the parent will be called to pick up their child and they will need to pay for the supervised jungle gym play time.

5) Picture Policy:

I understand any pictures taken at the ACROFITNESS® studio or off site, during a class, during outdoor training or performances is the sole property of ACROFITNESS® and may be used at their discretion.

6) Pet Policy: There are NO pets allowed on the ACROFITNESS® property. Service animals only.

7) Behavior Policy:

If your child is engaging in disruptive behavior, we inform you two times. the third offense will cause us to remove your child permanently from the class. **Monies paid will not be refunded.** We are passionate about the many skills we have to share with your children however we are not a babysitting service and will not risk injury to your child or another child because of a student who is not paying attention or disrupting instruction. Disrespectful and/or vulgar vocabulary will not be tolerated.

8) Cell Phone Policy:

Students are not allowed to have cell phones in class rooms and are encouraged to leave them at home as ACROFITNESS® is not responsible for lost, stolen or damaged phones. We have a landline phone for emergency use.

ACROFITNESS PARKOUR, PEEWEE PARKOUR & PRINCESS PARKOUR

- I recognize that the use of the ACROFITNESS® Parkour facility and all related equipment and/or property (collectively, the Parkour Facility) have known and unknown risks of injury, including but not limited to: physical or emotional injury, paralysis, death, or damage to myself, to property or to third parties.
- In consideration of being permitted to participate in classes, programs or workshops, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the program.
- In the event that my child or I is injured, I agree to assume financial obligation, either through my health insurance, or through some other means, for any medical costs that my child or I incur. Studio 202, INC dba ACROFITNESS® assumes no responsibility for any medical expenses, injury or damages suffered by me or my child on connection with my or my child's use of the Parkour facility.
- I, my heirs and legal representatives, on my own behalf and/or on the behalf of my child, forever release waive, discharge and covenant not to sue Studio 202, INC dba ACROFITNESS® its directors, owners, shareholders, officers, parents, affiliates, subsidiaries, coaches, employees, volunteers, sponsors, official and/or agents (collectively, the "Releasees") for any injury or death caused by their negligence or other acts while I or my child are on or about the Parkour facility or using equipment or participating in any program affiliated with Studio 202, INC dba ACROFITNESS®, including but not limited to freerunning activities and training exercises, gymnastics, personal training, open gym hours and activities, and open gym use.
- I promise to hold blameless the Releasees in the event that my child or I suffer bodily injury or harm, and 911 or any other law enforcement agency is summoned and provides aid to either my child or myself. I promise to waive to the greatest extent possible liability for emergency services provided for either my child or myself and for any resulting consequences while in the parkour Facility or subsequently thereafter.

I have read the release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Date _____ Signature _____
(parent or guardian signature)

Child's Name _____ D.O.B _____

Parent's Name _____

Street _____ Town _____ Zip _____

Home Phone # _____ Cell # _____ Work# _____

Email _____ Additional EMERGENCY Contact/Phone# _____

Doctor _____ Phone # _____ Preferred Hospital _____

List any allergies, medical conditions and/or limitations, etc.

Credit Card Information REQUIRED : NO DEBIT CARDS. MAJOR CREDIT CARDS ONLY (VISA, DISCOVER, MASTERCARD).

TYPE: _____ CC# _____

EXP _____ CSC# _____ AUTODRAFT _____

(INITIAL)