

EURO STARS GYMNASTICS

Registration Form

MUST be completed before attending first class

1. Student's Name: _____ M/F Age: _____ D/O/B: _____

2. Student's Name: _____ M/F Age: _____ D/O/B: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone number: _____ Email: _____ School/Grade: _____

For Camp: Session: _____ AM: _____ FULL DAY: _____ PM: _____

Family Information

Mother's/Guardian's Name: _____ Home/ Cell/WK: _____

Father's/Guardian's Name: _____ Home/ Cell/WK: _____

Emergency and Medical Information

Emergency Contact Name: _____ Phone#: _____

Alternate emergency contact

Name: _____ Phone#: _____

Food Allergy or any others: _____

Does your child have any medical condition that we should be alerted to, or she/he takes any medication at this time? Yes___ No___ If Yes explain: _____

Acknowledgment of Risk and Waiver of Liability

I hereby declare that I shall not hold the Euro Stars Gymnastics, nor any staff, instructors, or officials responsible for any accident nor any of their staff, instructors, or officials responsible for any accident/injury sustained by the above named during Recreation activities.

I further declare that in the event of an emergency, if I am unable to give my consent, I give consent for the above named to obtain medical treatment at the nearest medical facility.

As legal parent/ guardian of the aforementioned person, I hereby agree to individually provide for the possible future medical expenses which may be incurred by my child as a result of any injury sustained while participating in the class program at Euro Stars Gymnastics.

This acknowledgment of risk and waiver of liability is signed voluntarily as to its content and intent.

Parent or Legal Guardian (Circle one)

Date

Photograph/Video Release

Euro Stars Gymnastics may take photographs and/video of its students while participating in our program.

We have the permission to use this media in any manner at all for promotional and advertising use and for other trade purposes. Please initial that you read and agree. _____

HOW DID YOU HEAR ABOUT THIS PROGRAM ? _____

WHERE EVERY CHILD IS A STAR

OUR MISSION is to **BUILD HEALTHY BODIES AND STRONG MINDS** in a safe, structured, educational environment where your children can learn gymnastics skills that will carry them through life.

1. Tuition Due Date

Each session has 4 weeks. Payment is due before the start of each session.

Tuition will not be postponed, regardless if you come or not to your regular class.

A 10% late fee will be charged if tuition is not paid on time. **Initial please:** _____

Returned checks will incur \$25 charge, plus any applicable bank fees.

10% Family Discount. First child in family pays full amount.

All the other siblings will be discounted 10% from the regular price. Applied for class schedule only.

2. Refunds

There are no credits or refunds for dropping the class/ camp mid-session.

Refunds are available for emergencies only (severe illness, death in family, etc.) and must be requested in writing accompanied by documentation. Scheduling conflicts do not qualify as an emergency. Refunds or pro-rated rates are not given for days missed. A \$20 administration fee per registration applies to all changes and refund granted. **Initial Please** _____

3. If a class has less than three students enrolled after two weeks, it may be cancel. We will do our best to accommodate the students enrolled by trying to find another convenient class time.

4. Absence and Make-up Classes

Although it is best to attend the regular class, we offer one make-up class per 4 weeks term and must be schedule in advance through the instructor, although we will do our best, but cannot guarantee the same exact age and level if attended other than regular class.

5. Attire

Girls: Leotard or one piece bathing suit. **NO** loose clothing, jewelry, tights or socks. cause them to slip on the equipment. Long hair should be tied back.

Boys: T-shirt and elastic waist shorts. **NO** socks.

6. Drop OFF and pick Up

Alternative Pick up Name: 1. _____ Phone: _____

For the security of your child, drop off and pick up will take place inside the gym. **Initial Please** _____

Location: The Centre, Building 2
1550, 16th Street, Palm Harbor FL 34683
www.eurostarsgymnastics.net

Tel. 727 798 0861
727 686 5251

