

How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mothers Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fathers Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_

Are you interested in signing up for Auto Draft for tuition? Yes \_\_\_\_\_\_\_ No \_\_\_\_\_\_\_

Are there any medical conditions of which we should be aware of? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Gender \_\_\_\_\_\_ Male \_\_\_\_\_\_ Female

Age\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Gender \_\_\_\_\_\_ Male \_\_\_\_\_\_ Female

Age\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Eligibility to participate in class at Arizona Dreams Gymnastics requires a completed gymnast registration form with release of liability, and full tuition on or before the first day of class.**

**If gymnast is not yet 18 years old, at least one parent or legal guardian must sign:  
We certify that the information provided above is correct.**



**\*PLEASE READ CAREFULLY\***

I am aware that participation in this sport has the potential to be a dangerous activity involving many risks of injury. I understand the dangers and risks include but are not limited to death, serious neck or spinal injury, which may result in paralysis, brain damage, serious injury to internal organs, injury to all bones, ligaments, muscles, tendons, and other aspects of the body. I understand the dangers and risks playing or practicing may result in serious injury, but also serious impairment of future ability to earn a living, engage in business and generally enjoy life. **\_\_\_\_\_\_\_\_\_\_\_Initial – Parent/Guardian**

For the Gymnast: Because of the dangers of the sport, I understand the importance of following the coaches’ instructions regarding technique, training and other rules and agree to obey instruction:  
 **\_\_\_\_\_\_\_\_\_\_\_Initial – Parent/Guardian**

In consideration for allowing me to participate, I hereby assume all risks associated with the sport of gymnastics and agree to hold Arizona Dreams Gymnastics Academy, LLC & Landlord of Arizona Dreams Gymnastics from any and all liability, causes or action, debts, claims or demands of any nature whatsoever which may arise in connection with my participation in any activities. The terms hereof serve as a release and assumption of risk for heirs, estate and for all members of my family. I. as the parent/legal guardian/grandparent have read the above warning and release and understand it terms. I understand that the sport of gymnastics involves many risks, including but not limited to those outlined above. **\_\_\_\_\_\_\_\_\_\_\_Initial – Parent/Guardian**

I understand that it is my responsibility to review the policies, procedures and guidelines of Arizona Dreams Gymnastics Academy, LLC and its various programs from time to time. They are available from the front office. Some more common policies, procedures and guidelines which are frequently asked about are: make ups are available two times per month; a $15 late fee is assessed to accounts that are 14 days past due; responsibility for my child’s whereabouts and care before and after class is solely the responsibility of the parent and/or caregiver. **\_\_\_\_\_\_\_\_\_\_\_Initial – Parent/Guardian**

I authorize the staff at Arizona Dreams Gymnastics Academy, LLC to act for me according to their best judgement in any emergency requiring medical attention when I cannot be reached to so consent. **\_\_\_\_\_\_\_\_\_\_\_Initial – Parent/Guardian**

I understand that Arizona Dreams Gymnastics Academy, LLC retains all rights to the use of any photos, videos or audio recordings taken while at the Arizona Dreams Gym for use in publicity. **\_\_\_\_\_\_\_\_\_\_\_Initial – Parent/Guardian**



**Arizona Dreams Gymnastics Policies**

All children will need to stay in the building until they are picked up due to safety concerns. Children who are not enrolled are not to be left unattended in the building. CHILDREN MUST BE PICKED UP WITHIN 5 MINUTES OF THEIR CLASS!!!

There is $30 Registration/Admin Fee due upon initial registration. This fee is per family, not per student.

\*\*\* This is an ANNUAL registration/admin fee of $30 due every January.

If your child is not going to participate in the next month, you must give the front office one-week prior notice otherwise your account will be charged.

**Gymnastics Classes run concurrently, your child will be automatically reenrolled in the next session unless you contact the front office and let them know otherwise.**

A student may enroll at any time during a session/month, tuition rates will be prorated.

**No refunds or credits** for missed or dropped classes.

We do offer make-up classes or a free open gym if your child is sick or you are unable to make it to class. **You must call if your child is going to miss a class if you would like to be eligible for a make-up.**

We reserve the right to remove a child from a class for disciplinary reasons.

We reserve the right to drop any class that has fewer than 3 kids enrolled in it, you would be contacted to move your child to another class.

Students must come to class in proper attire, no zippers, dangly earrings, jewelry and form fitting clothing. A leotard isn’t required. PLEASE have hair pulled back in a secure fashion, including bangs pinned back if necessary. BEFORE CLASS STARTS.

I have read the above policies and understand that these policies will be in effect as long as my student is registered at Arizona Dreams Gymnastics Academy. I agree to follow the above policies as stated above.



**Acknowledgement of Risk and Waiver Liability for Gymnastics**

As legal guardian of (PLEASE PRINT Student’s name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I hereby consent to the aforementioned person participating in Arizona Dreams Gymnastics Academy programs. I recognize the potentially severe injuries including permanent paralysis or death can occur in any activity involving height or motion, including cheer, camp, dance, gymnastics, open gym and related activities including tumbling and trampoline.

I understand that it is the express intent of Arizona Dreams Gymnastics Academy to provide for the safety and protection of my child and, in consideration for allowing my child to use these facilities, I hereby forever release Arizona Dreams Gymnastics Academy, it’s officers, employees, teachers and coaches from all liability for any and all damages and injuries suffered by my child while under the instruction, supervision, or control of Arizona Dreams Gymnastics Academy.

As legal 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 training at, or performing for, Arizona Dreams Gymnastics Academy.

This acknowledgement of risk and waiver of liability, having been read thoroughly and understood completely, is signed voluntarily as to its content and intent.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Parent or Legal Guardian’s Signature Date