

EDGE GYMNASTICS II
RIVERSIDE
REGISTRATION FORM

Student (1) Name: _____ M / F Age: _____ Birthday ____/____/____

Student (2) Name: _____ M / F Age : _____ Birthday ____/____/____

Student (3) Name: _____ M / F Age : _____ Birthday ____/____/____

Student (4) Name: _____ M / F Age : _____ Birthday ____/____/____

Student(s) Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ - _____

Medical Conditions / Allergies: _____

PARENT / GUARDIAN INFORMATION:

Name of person responsible for payment of tuition? _____

Mother: _____ / **Father:** _____

Address: (if different than athlete address) _____ Address: (if different than athlete address) _____

Home Phone (_____) _____ - _____ Home Phone (_____) _____ - _____

Cell Phone (_____) _____ - _____ Cell Phone(_____) _____ - _____

Work Phone (_____) _____ - _____ Work Phone (_____) _____ - _____

e-mail _____ e-mail _____

X _____ / _____ / _____

(Signature of Parent or Guardian of minor child)

(Date)

LIABILITY WAIVER ON REVERSE SIDE MUST BE SIGNED

******NOTE****** There is an annual registration fee of \$42.50 per child or \$75.00 per family, renewable every Sept.
At least 3 – 5 students (depending on the class type) are needed to keep a class open.
Missed Classes cannot be used as a credit towards tuition.

OFFICE USE ONLY

TRIAL CLASS: _____ Date: _____

EDGE GYMNASTICS
Release of Liability Waiver

Name of child participant (if under 18) _____

I, (we) despite all reasonable precautions implemented for safety, am (are) 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 with participation in the programs and/or activities. I (we) knowingly and willingly assume all risks. Consequently, I (we) hereby for myself, heirs, executors and administrators, do waive and release any and all rights and claims for damages against the owners, operators, coaches and other staff members of EDGE GYMNASTICS, from personal injury or accident of any sort or nature suffered by me, (us), the undersigned, by reason of participation or membership in classes, lessons or any programs or activities of EDGE GYMNASTICS.

This release and all above statements includes parents/guardians, siblings, guest that might be in the gym or at EDGE GYMNASTICS activities and releases EDGE GYMNASTICS of any and all liabilities.

MINOR RELEASE

I, the undersigned minors parent and/or legal guardian, understand the nature of these activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, release from all liability claims, demands, losses, or damages on the minor's account caused or alleged to be caused, in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations. I further agree that if, despite this release, I, the minor or anyone on the minor's behalf makes claim against any of the releases named above, I will indemnify, save and hold harmless each of the releases from any litigations expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim

********PHOTO / VIDEO RELEASE WAIVER********

I, the undersigned minor's parent and/or legal guardian give EDGE Gymnastics permission to use photographs and videos taken by EDGE Gymnastics and its staff members taken during class and/or special events.

_____ I give my permission _____ I do not give my permission _____
Initial Initial

Parent / Guardian Signature of Minor Child _____ Date _____

Participant Signature (if over 18) _____ Date _____