



GYMNASTICS REGISTRATION FORM

The Gymnastics Bus classes will feature gymnastics, sports, skill building activities, music, and games. Each child will have access to different gymnastic equipment and training apparatus. All classes are age appropriate and taught by progression levels. We provide gymnastics with a wellness program to promote a healthy lifestyle! Classes are held while your child is at school. Classes are 30 minutes in length.

See School Director for Current Session Dates and Fees

Call Jennifer if you have any questions @ (574) 340-9454 or email: jleininger5@gmail.com
Fill out Reg Form and make Payment payable to: Gymnasts in Motion. Return to school director.

Registration Form- Gymnasts In Motion

(Please fill out form completely)

School Name: _____

Child's Name _____ Birthdate _____

Parent Name _____

Parent Email _____

Insurance Name and Policy # _____

Assumption of Risk, Waiver of Liability, and Medical Authorization

As Legal guardian of (child's name) _____, hereafter, child(ren), I recognize that potentially severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to gymnastics, tumbling, trampoline, cheerleading, sports and parties. Being fully aware of these dangers, I voluntarily consent to the aforementioned person(s) participating in any and all Gymnasts In Motion's programs and activities and I ACCET ALL RISKS associated with that participation including all risks for exposure to or transmission of Covid-19. In consideration for allowing me and my child to use these facilities, I, on behalf of my child(ren) and our respective heirs, administrators, executors and successors, hereby COVENANT NOT TO SUE and FOREVER RELEASE Gymnasts In Motion, its officers, directors, shareholders, employees, or agents. In the event of an emergency, I would like my above mentioned child(ren) to be taken to a hospital for any medical treatment and I hold Gymnasts In Motion and its representatives harmless in their execution of this action. Additionally, I hereby agree to individually provide for all possible future medical expenses which may be incurred by me or my child as a result of any injury sustained while participating at Gymnasts In Motion. By participating in activities here at Gymnasts In Motion, you are granting your permission for you and your child(ren) to be filmed, videotaped, audio taped, and/or photographed by any means and are granting full use of your likeness, voice, and words without compensation.

I have read and understood this assumption of risk, waiver of liability and medical authorization. I voluntarily affix my name in agreement.

I, the parent or legal guardian, do hereby consent to my child(ren), (enter child's name) _____ participating in Gymnasts In Motion.

I (we) acknowledge that I (we) have been informed of the risks of gymnastics.

Parent or Guardian Signature

Date

***Visit us at www.gymnastsinmotion.net or Facebook: *Gymnasts In Motion* or Instagram @gymnastsinmotion**