



Class Day/Time \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

I.D. Password \_\_\_\_\_ Date: \_\_\_\_\_

Student's First Name	Middle	Last	Birthdate	Age	M	F
					<input type="checkbox"/>	<input type="checkbox"/>

Home Address	City	State	Zip Code
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Home Phone	Cellular Phone	Home E-Mail Address
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School Student Attends	Grade	Dismissal Time
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History of special information/past injuries, etc. \_\_\_\_\_

Mother's Name	Driver's Lic #	Mother's Work Phone	Mother's Cellular Phone
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Father's Name	Driver's Lic. #	Father's Work Phone	Father's Cellular phone
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Emergency Contact Other Than Parent	Emergency Contact's relationship to Student	Emergency Contact's Home (or work) Phone	Emergency Contact's Cellular Phone
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CONSENT AGREEMENT: From time to time, we promote activities and celebrate student achievements on our social media pages. Please sign this consent to give us permission to publish your child's image, video and/or name (we use first name only):

\_\_\_\_\_ (print name) (I), parent/guardian of \_\_\_\_\_ (Student), grant permission to Ocean Tumblers® Gymnastics to use and/or publish my/our first name(s), event details/outcomes and photographs/videos for promotional purposes, on the club's social media pages. I understand that these images may be seen in a public environment.

\_\_\_\_\_ (Parent/Guardian Signature)

I understand a yearly registration fee is applied to my account. Annual registration is due and payable on the renewal date. I understand I am not billed by mail but tuition is due in the office by the 1<sup>st</sup> of each month. I also understand there is a \$10.00 charge for tuition not paid by the 7<sup>th</sup> of each month and an additional \$15 charge for tuition not paid by the 15<sup>th</sup> of the month. There is a \$50.00 fee on all returned checks \_\_\_\_\_. (Initial). If tuition is not paid by the last day of the month, your child will lose the spot in the class.

I hereby agree to give two calendar weeks advance written notice in the event the Student is withdrawn from Ocean Tumblers®, Inc. If proper notice is not given, I will be responsible for all lessons preceding the receipt of withdrawal notice, plus two weeks. This agreement will automatically renew on the anniversary of enrolling. If I discontinue the program for any reason and re-enroll during the same registration year, the registration fee is good for one calendar year from the Student's original date of enrollment. \_\_\_\_\_. (Initial).

I am fully aware of and acknowledge that my Student, will participate in activities involving height, motion and/or physical contact where there is risk of injury to the Student. These activities, even if done correctly, and from interaction with others, including those who may perform moves improperly resulting in physical injury to Student or bystanders, may consist of tumbling, jumping, aerial stunts, stretching and the use of acrobatic equipment commonly utilized in gymnastic activities, ninja zone, karate or cheerleading. Our facility contains uneven surfaces and multi-level mats or equipment which could cause Student to fall or land improperly resulting in physical injury. There is a risk of catching a virus, disease, or illness from contact with a person who has such a condition, or touching a surface that is infected. Inclement weather, water fountains, and restrooms involve water which may cause slippery surfaces and could cause a fall. (See [www.oceantumblers.com/returntogym.php](http://www.oceantumblers.com/returntogym.php)) to review cleaning procedures.

I know of no impairment that would affect or be affected by the Student's participation in any Ocean Tumblers®, Inc. activity, and I agree to notify Ocean Tumblers®, Inc. in writing if I learn that the Student has or incurs any such impairment. I give Ocean Tumblers®, Inc. its owners and operators, permission to seek medical treatment for the Student, in the event they are not able to reach a parent or guardian. Furthermore, I grant permission to transport the Student to the appropriate hospital, if necessary.

I, the undersigned parent(s) or guardian(s) of Student above, in consideration of Ocean Tumblers®, Inc. accepting the Student, hereby agree to release, indemnify, defend and save harmless Ocean Tumblers®, Inc., its employees, agents, officers and directors against all claims, judgments or demands for damages occurring as a result of injuries sustained by the Student named above during or as a result of any course given the Student by Ocean Tumblers®, Inc. or during or as a result of any event or other activity sponsored by or participated in by Ocean Tumblers®, Inc.

By my/our signatures/initials above and below, I attest that I am authorized to give consent for the Student's participation in Ocean Tumblers®, Inc.'s courses, programs and activities:

Printed Name of Parent or Guardian	Date	Printed Name of Parent or Guardian
Signature of Parent or Guardian	Date	Signature of Parent or Guardian

Please tell us how you learned about Ocean Tumblers®: \_\_\_\_\_

Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card: \_\_\_\_\_