

WENDY'S GYMNASTICS 2010 SPRING REGISTRATION

1 st CHILD	1 st CHOICE	2 nd CHOICE
Name:	Level:	Level:
Sex: Age: Birthday:	Day & Time:	Day & Time:
2 nd CHILD	1 st CHOICE	2 nd CHOICE
Name:	Level:	Level:
Sex: Age: Birthday:	Day & Time:	Day & Time:
3 rd CHILD	1 st CHOICE	2 nd CHOICE
Name:	Level:	Level:
Sex: Age: Birthday:	Day & Time:	Day & Time:

Please assume each child has been enrolled in his/her 1st choice class unless notified by our office.

Parent's Name:	Phone Numbers:
Address (street, city & zip code):	
Emergency Contact (name & phone number):	
Relevant Medical Information:	

HOW TO REGISTER

- Registration begins immediately – please complete the registration form and submit it to:
Wendy's Gymnastics and Fitness for Children
2460 Wood Avenue
Columbus, Ohio 43221
- Please also include the \$40.00 annual family registration fee in order to reserve your child's space in class.
- To increase the chance of enrollment in your child's first class choice, do not wait. Submit this form today!!

FEE SCHEDULE

Annual Family Registration Fee (due every Fall Quarter or whichever quarter you begin enrollment).....	\$40
Tumble Tot, Kinder-girls, Beginner, Intermediate, Boys Fitness, Cheerleading.....	\$140
Advanced/Elite 8-12, Beg/Int 8-12, Boys Fitness 8-12.....	\$155
10% family discount off total class fee for 2 or more children enrolled.	
Please make checks payable to: Wendy's Gymnastics, Inc.	
Your child's class fee is due on the first day of his/her class.	

ACKNOWLEDGEMENT OF RISK, RELEASE OF LIABILITY AND MEDICAL CONSENT

1. Acknowledgement of risk – Wendy's Gymnastics and Fitness for Children is a place to learn gymnastics; it is not a recreational facility. As trained instructors in the sport of gymnastics, our primary concern is the safety of all participants, including parents and guardians. For this reason, we ask that the following be carefully read, acknowledged and agreed to by signature.

A. Gymnastics, by its very nature, involves physical activity such as jumping, twisting, flipping and landing and as such, there is a risk of serious injury inherent to the sport. Activities involving motion, height and/or speed creates the possibility of serious injury.

B. Fractures, ligament tears, cartilage tears, and possibly even serious head and neck injuries, although rare, may occur.

C. In order to reduce the risk of injury during participation and to maintain a safe learning environment, rules and regulations are established that must be followed by everyone.

D. The responsibility for the safety of the gymnasts is shared by the instructor, participant and parents who support and encourage safe conduct.

2. Release of Liability – I, personally and on behalf of my child, hereby release Wendy's Gymnastics, Inc. (and all agents, representatives, and assigns) from any and all liability or claims that may arise from any program or activity on the premises.

3. Medical Consent – In the event of a medical emergency involving my child when no parent or guardian can be reached, I consent to my child receiving any and all necessary medical treatment.

ACKNOWLEDGED AND AGREED: *Please sign twice.*

Parent/Guardian Signature
(individually and as parent/guardian)

Parent/Guardian Signature
(on behalf of participant)

Date