

Registration Form for Oasis Gymnastics & Sports Center

STUDENT INFORMATION

NAME: _____ SEX: _____ AGE: _____ BIRTH DATE: _____

SPECIAL NEEDS/MEDICAL ISSUES/ALLERGIES: _____

NAME: _____ SEX: _____ AGE: _____ BIRTH DATE: _____

SPECIAL NEEDS/MEDICAL ISSUES/ALLERGIES: _____

NAME: _____ SEX: _____ AGE: _____ BIRTH DATE: _____

SPECIAL NEEDS/MEDICAL ISSUES/ALLERGIES: _____

NAME: _____ SEX: _____ AGE: _____ BIRTH DATE: _____

SPECIAL NEEDS/MEDICAL ISSUES/ALLERGIES: _____

PRIMARY PARENT/LEGAL GUARDIAN INFORMATION

NAME: _____ CELL# _____ HOME# _____

NAME: _____ CELL# _____ HOME# _____

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS FOR PARENT PORTAL LOGIN: _____

ADDITIONAL EMAIL ADDRESSES FOR NOTIFICATIONS: _____

WE SEND OUT END OF TERM REMINDERS, HOLIDAY CLOSURE INFORMATION AND SPECIAL EVENT EMAILS. BY GIVING US YOUR EMAIL ADDRESS YOU ARE OPTING IN TO RECEIVE THESE EMAILS AND YOU MAY UNSUBSCRIBE AT ANYTIME.

EMERGENCY CONTACT (NAME & PHONE NUMBER): _____

HOW DID YOU HEAR ABOUT US? (IF WORD OF MOUTH, FROM WHOM?) _____

ADDITIONAL PARENT/GUARDIAN CONTACTS (IF APPLICABLE)

NAME: _____ CELL# _____ HOME# _____

NAME: _____ CELL# _____ HOME# _____

ASSUMPTION OF RISK, WAIVER OF LIABILITY, MEDICAL AUTHORIZATION

As legal guardian of the above named student/s, 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, dance, and cheerleading. Being fully aware of these dangers, I voluntarily consent to the aforementioned person participating in any and all Oasis Gymnastics and Sports Center, Inc.'s programs, camps, and activities and I **ACCEPT ALL RISKS** associated with that participation. As a part of taking classes or activities at Oasis Gymnastics & Sports Center my child's picture and/or video may be taken and used on the Oasis Gymnastics website, social media pages, emails or on a poster within the lobby.

In consideration for allowing my child to use these facilities, I, on my own behalf and the behalf of my child and our respective heirs, administrators, executors and successors, hereby **COVENANT NOT TO SUE** and **FOREVER RELEASE** Oasis Gymnastics and Sports Center, Inc. its officers, directors, shareholders, employees or agents from all liability for any and all damages or injuries suffered by my child while under the instruction, supervision, or control of Oasis Gymnastics & Sports Center including, without limitation, those damages or injuries resulting from acts of negligence on the part of its officers, directors, shareholders, employees or agents.

In case of medical emergency, I hereby give my consent to Oasis Gymnastics and Sports Center, Inc. to provide customary and medical training attention, emergency medical services and transportation as deemed necessary for the care and protection of my child while participating in Oasis Gymnastics and Sports Center, Inc. activities.

I have read and understand this **ASSUMPTION OF RISK** and **WAIVER OF LIABILITY** and **MEDICAL AUTHORIZATION** and I **VOLUNTARILY** affix my name in agreement. I have also read and received the **RULES** and **POLICIES**.

Parent or Legal Guardian's Signature

Date

OVER 

RULES AND POLICIES

Oasis Gymnastics and Sports Center has established the following guidelines in the interest of SAFETY and to allow each student to reach his/her highest potential while in our programs. Parents, please be sure your children understand these guidelines.

- **Automatic Payment Policy:** All families must have a payment method on file (major credit, debit card or E-check) and *future tuition will be withdrawn automatically* from the card or checking account on file on the 25th day of the preceding month. You may pay with another form of payment before the 25th and your automatic payment will not occur as scheduled. Initial _____
- **Late Fee:** For team/developmental team members only, tuition is due by the 25th of the month. If your payment is declined, we will contact you for an alternate method of payment. If payment is not made by the 25th a late fee of \$30.00 will be posted to your account for any unpaid tuition and/or fees. Initial _____
- **Enrollment Cancellation:** To cancel your enrollment - just access the parent portal or drop us an email at info@oasisgym.com *no later than the 20th of the month to cancel your next month's enrollment.* Notification must be either through the parent portal or email, no verbal requests will be honored. We will send you a confirmation that we have received your request to drop. For example if you plan on taking a break for the month of July, we will need notification by June 20th. There are no refunds once Autopay has run on the 25th. Initial _____
- **Returned Checks:** A \$25.00 fee will be charged for any returned checks, this includes E-checks used for Autopay.
- We have a large viewing area for parents, siblings and visitors. Parent viewing area is at the front of the gym **ONLY**. For safety reasons, please **DO NOT ENTER THE GYM AREA**. Please supervise all children who are not in class, do not allow them to jump, climb or run around the lobby.
- **Parents:** Please do not talk to, "coach", or in any way distract a student's or instructor's attention while class is in session. This is disruptive and a safety factor.
- **Late Arrival:** For safety reasons, any student arriving more than 10 minutes after a class has begun will not be allowed to participate. Proper warm up is necessary for safe practice. Initial _____
- **Make-Up Policy:** As a courtesy, we will offer ONE makeup per month in one of our designated makeup classes. Students must be currently enrolled to schedule and attend a makeup class. Makeups must be made up within the month that they are missed and are subject to space availability. Missed makeups cannot be made up. Please call to cancel your makeup class at least one day before the scheduled date if you cannot attend. *Not applicable for students enrolled in team classes, Advanced Rec program or Muscle Mania.* Initial _____
- **Move Ups:** (Girls/Boys Recreational Classes) When your child is ready to advance, the coach will give you a "Move-Up Slip". Bring this card to the front desk and the staff will help you to enroll in the next level. Please understand that if a space is not available in the next level at a convenient time, you may put your child's name on a waiting list. Your child is then encouraged to continue attending their current class until the office staff notifies you of an available space.
- **Behavior:** Our instructors will handle any discipline problems or injury that may occur during class. If you are needed, we will call upon you. Students exhibiting disruptive behavior may be given a "Time Out". If behavior continues, the child may be dismissed from the class. For repeated behavior problems, a student may be asked to leave the Oasis program for a specified or undefined period of time
- **Dress Code:** All children must be appropriately dressed for class to participate. Personal Hygiene is important. Please have clean hands, feet, face, and hair when you come to class. Please use deodorant if appropriate.
Gymnasts: Girls must have their hair tied back off their face, leotard, or sport shorts with fitted shirts that can be tucked in. Boys can wear sport shorts and fitted shirts that can be tucked in. During the winter, capris, sweatshirts or sweatpants are allowed provided they do not hinder the student's performance. No shoes, socks, jewelry, jeans, zippers, belts, or pants with snaps are to be worn.
Dancers: Ballet: Black leotard, pink tights, and ballet shoes.
Jazz, Tap, Hip Hop & Pom/Dance: Jazz shorts/pants are permitted or leotard and tights. Jazz- jazz shoes, tap- tap shoes, hip hop/pom- sneakers.
Gym Dance Combo Class: leotard, tap and ballet shoes (no tights).
Dancers' Hair : All dancers must have their hair tied back off face.
- **Private Lessons:** All private lessons must be paid for prior to the start of a lesson. *No shows will be charged the full amount of the private lesson.*
- **Food, Drinks & Gum:** Are not permitted in the gym. Water and sports drinks in a sealed container with a cap are allowed.

By signing this I acknowledge that I have read and understood the above stated policies.

Parent's signature

Print Name Please