## Noha's Gymnastics Academy NGA Registration & Waiver Form

200 Perimeter Road, Manchester NH 03103 info@ngacademy.us • www.ngacademy.us

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Participant Name:	Participant DOB:			
Parent/Guardian Name (1):  City/State: Zip:  Parent/Guardian Name (2):  City/State: Zip:	Email:			
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")				
In consideration of participating in activities at <b>Noha's Gymnastics Academy NGA</b> , I represent that I understand the nature of this activity and that I am qualified, in good health and in proper physical condition to participate in such activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. I fully understand that this activity involves risks of serious bodily injury, including permanent disability, paralysis, and death, which may be caused by my own actions, or inactions, those of other participating in the event, the conditions in which the event takes place, or the negligence of the "releases" named below, and that there may be other risks either not known to me or not readily foreseeable at this me; I full accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activity.				
I hereby release, discharge and covenant not to sue <b>Noha's Gymnastics Academy</b> , its respective administrators, directors, agents, officers, volunteers, and employees, other participants, and sponsors, advertisers, and, if applicable, owners and lessors of premises on which the activity takes place (each considered "Releases" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part of the negligence of the "releases" or otherwise, including negligent rescue operations and future agree that if, despite this release, waver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the Releases from any loss, liability, damage, or cost, which any may incur as a result of such claim.				
have given up substantial rights by signing it and have signed it freely	PTION OF RISK, AND INDEMNITY AGREEMENT, understand that I and without any inducement or assurance of any nature and intent it to be at allowed by law and agree that if any portion of this agreement is held to d effect.			
capabilities and believe the minor to be qualified to participate in such INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releaccount caused or alleged to have been caused in whole or in part by operations, and further agree that if, despite this release, I, the minor,	ature of the above referenced activities and the Minor's experience and activity. I hereby release, discharge, covenant not to sue and AGREE TO eases from all liability, claims, demands, losses, or damages on the minor's the negligence of the Releases or otherwise, including negligent rescue or anyone on the minor's behalf makes a claim against any of the above ch of the Releases from any litigation expenses, attorney fees, loss liability,			
I further understand that if I enter the facility, I do so at my own risk understand that I am not allowed on any gymnastics equipment.	k. I understand that the facility has flooring with uneven surfaces. I also			

Signature of Parent or Legal Guardian

Date

Printed Name of Parent or Legal Guardian

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## Noha's Gymnastics Academy POLICIES, MEDICAL RELEASE, AND FINANCIAL COMMITMENT Financial Commitment:

- A \$45.00 non-refundable yearly (Sept-Aug) student registration fee must accompany this form. Registration fee is NONREFUNDABLE and is NOT deducted from tuition.
- In order to avoid a \$20 monthly late fee, monthly tuition payments must be received by the FIRST FRIDAY of each CALENDAR MONTH.
- Families registering more than one student in recreational gymnastics classes are eligible to receive a 10% discount o tuition for each additional student.
- There are no discounts for pre-team, team, or cheering.
- Outstanding balances may result in your child losing their assigned space in our program.
- Withdrawal/Termination from Programs: Monthly tuition fees are NON-REFUNDABLE. If a student withdraws in the middle of a month, there will be no refund of that month's tuition.
- All fees and charges are due regardless of attendance.
- Returned check fee of \$25.00.
- A \$25.00 reinstatement fee will be charged to anyone returning to the team or pre-team programs.
- A calendar and tuition schedule will be provided prior to each season.

Card Number:	Security Code:	Expiration:	Signature:	
Medical Information:				
Are there any medical conditions/allergies for the student to which we should be alerted?				
<b>PERMISSION FOR MEDICAL TREATMENT:</b> I authorize the necessary steps regarding medical a en on (i.e. first aid, calling ambulance service or transportation to be admitted to the hospital) and will allow authorized hospital faculty and start to treat my child for any illness or injury he/she has.				
Emergency Contact Information:				
Name:	Phone Number:	Rela	tionship to Student:	
<b>Photo Release:</b> I grant NGA, its representatives, and employees the right to take photographs and video in connection with gymnastics, cheering and its related activities. I authorize NGA, and those representing NGA, to use and publish the same in print and/or electronically.				
Print Name:	Signatur	e:		