

<b>Guardian's Last Name:</b>	<b>Guardian's First Name:</b>
<u>Child's Mailing Address:</u> _____ _____	And you are the: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandparent <input type="checkbox"/> Guardian <input type="checkbox"/> Other
Apt/Unit: _____ Postal Code: _____	Main Phone No.:
Last Name of Payer:	Cell/ Emerg Phone No.:
How Did You Discover Victoria Gymnastics? <input type="checkbox"/> Island Parent <input type="checkbox"/> Web Search <input type="checkbox"/> Friend <input type="checkbox"/> Birthday Party <input type="checkbox"/> School <input type="checkbox"/> Social Media <input type="checkbox"/> Gift Certificate <input type="checkbox"/> Renewal <input type="checkbox"/> Sibling Attends <input type="checkbox"/> Other Gym _____	<b><i>I have read and understood the registration policies in the current brochure. I unconditionally agree to comply with each policy:</i></b> <u>  X  </u>

### 1st. Child

<b>1<sup>st</sup>. Child's First Name:</b>	Gender: Male or Female (circle)
<b>Child's Last Name:</b>	Current Experience: Year(s)____ Month(s)____
Birth Date: Year____ Month____ Day____	Current Date: Year____ Month____ Day____
Medical Note:	Special Needs:
Class Type: <input type="checkbox"/> Parent & Tot <input type="checkbox"/> Kindergym <input type="checkbox"/> Recreation <input type="checkbox"/> Perform <input type="checkbox"/> Advanced Rec. <input type="checkbox"/> Pre Comp. <input type="checkbox"/> Competitive <input type="checkbox"/> Adult Gym <input type="checkbox"/> Other: _____	
<b>1<sup>st</sup>. Class Time:</b> Fr. _____ to _____ Class Day : <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
<b>2<sup>nd</sup>. Class Time:</b> Fr. _____ to _____ Class Day : <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	

### 2nd. Child

<b>2<sup>nd</sup>. Child's First Name:</b>	Gender: Male or Female (circle)
<b>Child's Last Name:</b>	Current Experience: Year(s)____ Month(s)____
Birth Date: Year____ Month____ Day____	Current Date: Year____ Month____ Day____
Medical Note:	Special Needs:
Class Type: <input type="checkbox"/> Parent & Tot <input type="checkbox"/> Kindergym <input type="checkbox"/> Recreation <input type="checkbox"/> Perform <input type="checkbox"/> Advanced Rec. <input type="checkbox"/> Pre Comp. <input type="checkbox"/> Competitive <input type="checkbox"/> Adult Gym <input type="checkbox"/> Other: _____	
<b>1<sup>st</sup>. Class Time:</b> Fr. _____ to _____ Class Day : <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
<b>2<sup>nd</sup>. Class Time:</b> Fr. _____ to _____ Class Day : <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	

Child's Last name:

**PLEASE READ CAREFULLY**

**ASSUMPTION AND ACKNOWLEDGMENT OF RISKS FOR MINORS**

RE: Use of Premises and Equipment of the club named on the reverse side of this form.

TO: the above club, operating as the club named on the reverse side of this form (referred to in this document as the club named) and its directors, officers, employees, representatives, officials, landlord and agents (collectively referred to in this document as the "Agents")

I have read the guidelines and rules issued for the use of the club named's premises and equipment, which I understand, and I agree to be bound by them. I further agree to acknowledge that:

1. The rules and guidelines governing the use of the premises and equipment are solely for that purpose, that is, for the use of gymnastics activities, and it remains my sole responsibility to act and govern myself in such a manner as to be responsible for my own safety;
2. I am aware of the risks inherent in participating in gymnastics activities and the use of gymnastics premises, facilities and equipment and I assume the risks and waive notice of all conditions, dangers or otherwise relating to or arising out of such use.

**General Gym Rules:**

- Do gymnastics safely
- Get your coach's permission before getting on equipment
- Get your coach's permission before attempting new moves
- Walk from place to place
- Watch where you walk
- If you leave the class, tell your coach

**Consent for Use of likeness and Information**

I grant to the club with which I am registered the right to use, without payment of any fee or charge, any photograph, video tape or other visual media of myself for the purpose of furthering the club's objectives including but not limited to use for media, inclusion in the club's publications and website(s), advertising.

Please Initial: YES \_\_\_\_\_ NO \_\_\_\_\_

**ADULT RELEASE AND INDEMNITY**

RE: Use of Premises and Equipment of **the club named on the reverse side of this form.**

TO: **the club named on the reverse side of this form**, operating as **the club named** (referred to in this document as "**the club named**") and its directors, officers, employees, representatives, officials, landlord and agents (collectively referred to in this document as the "Agents")

I have read the guidelines and rules issued for the use of **the club named's** premises and equipment, which I understand, and I agree to be bound by them. In consideration of your acceptance of my being permitted to use the premises and equipment and/or any activity associated therewith, I agree to RELEASE, SAVE HARMLESS AND INDEMNIFY **the club named** and/or its Agents from and against all claims, actions, costs and expenses and demands in respect to death, injury, loss or damage to my person or property wheresoever and howsoever caused, arising out of, or in connection with my use of the premises and equipment notwithstanding that the same may have been contributed to or occasioned by any act or failure to act, including, without limitation, negligence, of **the club named** and/or any one or more of its Agents. I further agree and acknowledge that:

1. the rules and guidelines governing the use of the premises and equipment are solely for that purpose and it remains my sole responsibility to act and govern myself in such a manner as to be responsible for my own safety;
2. I am aware of the risks inherent in participating in gymnastics activities and the use of gymnastics premises, facilities and equipment and I assume the risks and waive notice of all conditions, dangers or otherwise relating to or arising out of such use.

I further agree to HOLD HARMLESS AND INDEMNIFY **the club named** and its Agents from any and all actions, claims, demands, losses, judgements or costs of any nature to any third party resulting from my use of the premises and equipment herein and I agree not to make any claims or take any proceedings against any other person, society, corporation or other legal entity who might claim contribution or indemnity from **the club named** and/or its Agents in respect of matters which are the subject of this Release.

I agree that this Release shall bind my heirs, executors, administrators and assigns. I confirm that I am the full age of nineteen years and I have read this Release and understand it.

**I HAVE READ THE MINOR RELEASE STATEMENT / ADULT WAIVER ON THE REVERSE AND AGREE WITH THE TERMS.**

\_\_\_\_\_  
Signature (of Parent or Guardian if child is under 18)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Club Staff Signature 

\_\_\_\_\_  
Print Full Name