

## REGISTRATION FORM

## Instructions

- 1. Please print, except where a signature is required.
- 2. Read carefully and fill out all three pages of this document.

Student's Name	
(Last Name) (Fin	rst Name) (Middle Name)
AgeBirthdate/_	/Female / Male (Circle one)
Address	
CityState	
Home Phone	
Father's Name	
DL#:	State issued
Mother's Name	
DL#	State issued
E-mail Address	
Emergency Contact	
Relationship of Emergency Contact	
School	Grade
Please list any medical problems that we need to be awar	re of
Family Physician	Phone_()
Insurance Company	Policy #
How did you hear about us?	
-Office use only- Session/Month_	_20
Registration Received/Amour	ntCash / Check
Class Day: M T W Th F S Class time(s)	
LevelInstructor(s)_	

## WAIVER AND RELEASE OF LIABILITY

DISCLAIMER: GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD) IS NOT RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON WHILE PRACTICING, TAKING CLASS, COMPETING, PARTICIPATING IN OPEN GYM, BIRTHDAY PARTIES, OR IN ANY OTHER WAY INVOLVED IN GYMNASTICS, CHEERLEADING, OR PRESCHOOL CLASSES OR TEAMS AT GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD) FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD), ITS OWNERS, OFFICERS, AGENTS, OR EMPLOYEES.

In consideration of my participation, I hereby release and covenant not-to-sue GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD), the GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD) Board of Directors and officers, the GYMNAWORLD Booster Club, and any of their employees, teachers, coaches, or agents, from any and all present and future claims resulting from ordinary negligence on the part of GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD) or others listed for property damage, personal injury, or wrongful death, arising as a result of my engaging in or receiving instruction in gymnastics, cheerleading, or any other activities or any other activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, heirs, or assigns.

Further, I am aware that gymnastics and cheerleading are vigorous sporting activities involving height and rotation in an unique environment and as such they pose a risk of injury. I understand that gymnastics, cheerleading, and related activities always involve certain risks, including but not limited to, death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and serious injury to virtually all bones, joints, muscles, and internal organs, and that the mats, pits, and other safety equipment and apparatus provided for my protection, including the active participation of a coach or teacher who will spot or assist in the performance of certain skills, may be inadequate to prevent serious injury. The risk of harm may be limited by all of the safety equipment and trained coaches, but never eliminated. I understand that participation in gymnastics and related activities involves activities incidental to active participation in gymnastics, including moving from event to event, conditioning, stretching and other activities which may leave me vulnerable to the reckless actions of other participants who may not have complete control over their actions or who may not see other students in the gym. I am voluntarily participating in this activity with knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

I further agree to indemnify and hold harmless GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD) and all others listed for any and all claims arising as a result of my engaging in or receiving instruction in GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD) activities or any activities incidental thereto, whenever, wherever, or however the same may occur.

I understand that this waiver is intended to be as broad and as inclusive as permitted by the laws of the state of Indiana and agree that is any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be within the state of Indiana.

I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing
this form, I am giving up legal rights and or remedies which may be available to me for the ordinary negligence of
GYMNAWORLD INC. (DOING BUSINESS AS GYMNAWORLD) or any person listed above.

(Signature of Parent)

Date

(Signature of Participant if over 18 years of age)

Date



## Gymnaworld Gymnastics Survey

Gymnaworld offers a variety of programs, services, and products. Please complete the short survey below so that we may better enhance your gymnastics experience.

What are your family's present and possible future gymnastics interests? (Please check all that apply).

Programs  Gymnatots (Pre-school age gymnastics classes)  Recreational gymnastics classes for school age children (Gymnaskills program)  Pre-team and Competitive Gymnastics Teams (Gymnastars program)  Boys/Men's Pre-team and Competitive Gymnastics Teams  Dance for gymnastics  Pre-team and Competitive Trampoline and Tumbling  Tumbling classes for cheerleading
Services
Open gym
Private lessons
Parents' night out
Gymnastics birthday parties
Gymnastics day camps
Gymnastics sleepovers
Recitals / Student showcases
Products
Leotards
T-shirts
General gymnastics merchandise (gifts, jewelry, Gymnaworld wear & accessories, etc)
Gymnastics DVD's
Gymnastics mats for home use
Student's name: