

City of Goose Creek Recreation
GYMNASTICS & TUMBLING Registration Form

ALL Classes & Team REGISTRATION FEE: \$25 per participant, non-refundable
PROGRAM FEES for June 2022 – November 2022 - Payments are due on the 1st of each month.

Participant's Name: _____ Male: _____ Female: _____

Birthdate: _____ Age: _____

Address: _____ City: _____

Zip Code _____ Subdivision: _____

Does Participant live within the City of Goose Creek boundaries YES _____ NO _____

Cell phone: _____ **Permission to send text message Yes** _____ **No** _____ **Cell Phone Carrier:** _____

E-mail address: _____ **Work number:** _____

Would you like an Online Account? YES _____ **NO** _____
(If Yes, Online account information will be emailed to the responsible party.)

Name of Responsible Party: _____ Date of Birth: _____
(Parent/Legal Guardian if Participant is under 18) (Responsible Party)

Name of **MEDICAL INSURANCE COMPANY:** _____

Do you wish to purchase PLAYGROUND INSURANCE? (Required if you have no medical insurance \$10/child) YES _____ NO _____

Does the child have any **SPECIAL NEEDS** of which we should be aware? **YES** _____ **NO** _____
If so, what are they?

I UNDERSTAND that PAYMENTS MUST BE PAID BY THE FIRST DAY OF EACH MONTH. A LATE FEE OF \$10 will be charged on late payments. I understand that my space in the program may be FORFEITED if my payment is late.

I UNDERSTAND that a TWO-WEEK ADVANCED WRITTEN NOTICE must be given before withdrawing from the program. If no notice is given, I will PAY FOR THE PROGRAM.

Waiver & Release of Liability:

In consideration of being allowed to participate in Goose Creek Recreation sports, programs, related events and activities, the undersigned acknowledges and agrees that there are always risks involved in participation in recreational activities. I knowingly and freely assume all such risks, both known and unknown, even if arising from negligence and assume full responsibility for my participation. I declare the participant physically able to participate in the activity. In the event of a medical emergency, I authorize Goose Creek Recreation or its representatives to obtain emergency medical treatment for myself or child (if parent is not available). I willingly agree to comply with the stated and customary terms and conditions for participation. I, for myself and on behalf my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless City of Goose Creek Recreation, Goose Creek Recreation Commission, their officers, officials, agents, and /or employees, other participants, sponsors, and advertisers (releasees), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise, to the fullest extent permitted by law. I likewise release from liability, any person transporting myself or my child to and from these activities. I further grant GC Recreation the unencumbered right to make promotional use of any pictures and/or video tapes taken of the registrant while participating in this program. The City of Goose Creek has the right pursuant to the SC Setoff Debt Collection Act to collect any delinquent sum due through offset of state income tax refund including all fees.

I have read this release of liability and assumption of risk agreement and sign it freely and voluntarily.

For participants under the age of 18 at the time of registration: This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, for myself, my heirs, assigns, and next of kin, I release and agree to hold harmless the Releasees from any and all liabilities incident to the minor's involvement or participation in these programs as provided above, even if arising from their negligence, to the fullest extent of the law.

Signature: _____ **Name (Print):** _____
(Parent/Guardian Signature)

Refunds must be requested prior to the second-class meeting unless specified differently in the specific program policies. There is a handling fee on all refunds. Insurance is non-refundable. **Approval Initial** _____

CLASS REGISTERING FOR: Day/Time: _____

STAFF USE ONLY

Date paid _____ Registration Fee Paid _____ Month Paid For _____ Staff initials _____



Recreational Gymnastics -Coordinator Brittany LaRoche
blaroche@cityofgoosecreek.com 843-569-4242, Ext. 5304

Fees for 2021-2022 Gymnastics Program:

- The Gymnastics Program runs June 2022 – November 2022
- Registration Fees are Non-Refundable.

Payments Due:

- Monthly fees are due on the **1st of each month**
- A late fee of \$10 will be charged to all late payments

Drop-outs:

- A two-week **ADVANCED WRITTEN NOTICE** must be given before withdrawing from the program, if no notice is given, you will be **required to pay for the program.**
- If your child does not attend and no payment is made for the month, **they will automatically be dropped from the roster.**
- Credit for absences: **NO CREDITS WILL BE ISSUED.**
- Refund must be requested prior to attending the 2nd class of the program.
- There is a \$5.00 handling fee on all refunds.

Payments/Receipts: checks should be made payable to the **City of Goose Creek**

Fees may be: (if you need a written receipt, please make your payment in person)

- Paid in person here at the Activity Center
- Paid over the phone by calling 843-569-4242
- Mailed to: PO Drawer 1768, Goose Creek, SC 29445
- Set up an account online to pay online: www.cityofgoosecreek.com – recreation online or one of our staff will be happy to assist you in setting up your online account.

Pickup and Drop off Times:

- Please pickup and drop off your child in the Gymnastics Area
- You **MUST** come in to sign your child out.
- Please be on time – classes are scheduled back-to-back

Holidays and Missed Classes:

We are closed for scheduled holidays and scheduled city special events. These days are NOT subject to makeup and have been averaged into your monthly tuition. There are NO make-up days for missed classes, only for illnesses/injuries. We require a doctor's note to schedule make-up days for illness. We also require doctor's note AND release to return to activity for injuries.

Class Attire:

- Boys; wear shorts and t-shirt. Girls: are encouraged to wear leotards but may wear shorts and a t-shirt. If long hair, we ask that it is secured away from the face.
- Please, no socks or jewelry allowed! Gymnasts will be asked to remove jewelry.

Sign up for Notifications on our website – be sure to check the gymnastics box to get updates on everything pertaining to gymnastics. Check the recreation box for sports registration dates, rainouts, camps, programs and special events.