



## Registration 2008-2009

### Student Information

1.) Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

2.) Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

3.) Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Medical conditions or allergies to which we should be alerted \_\_\_\_\_

### Parent Information

Mom's Name: \_\_\_\_\_ Place of Business: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Dad's Name: \_\_\_\_\_ Place of Business: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_ Emergency Contact (Name/Number) \_\_\_\_\_

How did you learn about CartWheels Academy? (If word of mouth, from whom?) \_\_\_\_\_

Has anyone in your family previously been enrolled at CartWheels Academy? Yes No If yes, approximate date/year: \_\_\_\_\_

### Class Information

**Term 1 2 3 4** (Please circle one)

1.) 1st choice Class: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ \*

2nd choice \* Class: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ \*

2.) 1st choice Class: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ \*

2nd choice \* Class: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ \*

3.) 1st choice Class: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ \*

2nd choice \* Class: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ \*

**“No news is good news” You will only hear from us if you DO NOT receive your first class choice.**

**\*See you the first day of class!**

### Payment Information

Registration fee \$25.00 /or Family Registration Fee \$40.00 (unless paid within the last 12 months).....\$ \_\_\_\_\_

Registration fee is non-refundable

Tuition (10% off lesser tuition for 2<sup>nd</sup> child, 25% off 3 or more children).....\$ \_\_\_\_\_

TOTAL ..... \$ \_\_\_\_\_

Please Circle one: Check.....Cash.....Visa.....MasterCard.....Discover

Name on Credit Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_ Zip Code of Billing Address \_\_\_\_\_

Signature: \_\_\_\_\_

**\*NOTE: YOU MUST FILL OUT THE BACK OF THIS FORM\***



### Tuition and Fees

I/we acknowledge and agree that I/we am personally liable for all fees and tuition related to enrollment of my/our child(ren) or ward(s) at CartWheels Academy. Furthermore, I/we acknowledge that my/our liability will continue for all periods of enrollment, including renewals of the initial enrollment or any new enrollments. Such liability will continue until such time as I/we provide written notice to CartWheels Academy of the fact that I/we will no longer be liable for fees and tuition related to the enrollment of my/our child(ren) or ward(s), in which case I/we shall continue to be liable for all fees and tuition incurred prior to the date of receipt of the written notice by CartWheels Academy. I/we acknowledge that any fees and tuition that are not paid by their date shall bear a late fee of \$5.00/day and that in the event that CartWheels, LLC institutes legal action to recover any amounts due from me/us, I/we will be responsible for all court costs and reasonable attorney fees of 25% of the amount due.

Signature of Responsible Person

Printed Name of Responsible Person

\_\_\_\_\_

\_\_\_\_\_

### Photo/Interview Release Form

Occasionally, CartWheels Academy staff may photograph students with the intent of using the pictures in various publications and/or on our web site ([www.cartwheelsacademy.com](http://www.cartwheelsacademy.com)). Similarly, CartWheels Academy may wish to promote our student’s accomplishments by sending press releases to appropriate newspapers or publications. In addition, representatives of the media may be interested in stories relating to CartWheels Academy and may wish to interview, photograph or videotape our students. Please complete this form and return it to your teacher. **Non-response** to this request will indicate that you **grant** permission as indicated below.

I grant \_\_\_\_\_ do not grant \_\_\_\_\_ permission for press releases to be distributed about my son/daughter, and for photographs of and/or interviews with my child to appear in other mediums for as long as my child(ren) is enrolled in CartWheels Academy

Date: \_\_\_\_\_

\_\_\_\_\_

Please print name(s) of children enrolled

\_\_\_\_\_

### RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT (“AGREEMENT”)

In consideration of participating in Gym Activities 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 others 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 time; and I fully accept and assume all such risks and all responsibility of losses, cost, and damages I incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue CartWheels, LLC, 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 one of the “RELEASEES” herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save and hold harmless each of the Releasee from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without an inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extend allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Date: \_\_\_\_\_

\_\_\_\_\_

**\*If enrolling in a Parent Tot class you must print parent’s and child’s name on the line above\***

### PARENTAL CONSENT

I, the minor’s parent and/or legal guardian, understand the nature of the above referenced activities and the Minor’s experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby Release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the minor’s account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor’s behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Date: \_\_\_\_\_

\_\_\_\_\_

Printed name of Parent/or Legal Guardian

\_\_\_\_\_

Signature of Parent/or Legal Guardian