

Gymnast Name _____ Class day _____ Time _____

WELCOME TO NEBO GYMNASTICS! We are glad you have chosen our club and we are very interested in your child's progress in this beautiful sport. We have been in business since August 1977.

--We are a member of the United States Gymnastics Association (USGA).

--Our coaches teach the national level 1-10 curriculum, and we are well versed in proper physical and psychological instruction. Since 2000 Nebo Gymnastics has become the most advanced program in Utah Valley and one of the top 5 in the state of Utah.

WE TEACH gymnastics in the following areas:

1. Basic Level 1 and pre-school recreational gymnastics.
2. Pre-team and beginning USGA competitive teams.
3. Advanced competitive USGA national level teams.

OUR PRICING structure is set up on an ongoing monthly basis. Prices are subject to change with sufficient warning to make adjustments.

1. Pre-school \$55.00 --45 minute class
2. Basics (level 1) \$72.00--70 minute class
3. Pre-team and advance teams —Variable
4. AN ANNUAL INSURANCE/REGISTRATION FEE OF \$45. Reminder notices will be issued the month before the fee is due.

MONTHLY PAYMENTS are due by the 2nd week of each month. A \$10.00 late fee may apply to payments made after the 3rd week. WE DO NOT PRORATE FOR MISSED CLASSES. MAKE-UP classes are available. Please schedule make up classes with the office staff. Late payment notices will be sent home with your gymnast if necessary. RULES OF THE GYM designed to protect gymnasts, coaches and this business:

1. PARENTS- DO NOT COACH YOUR CHILD WHILE IN THE GYM! This would include yelling hints during class time. Coaching your child has been shown to cause confusion in gymnasts and undermines our coaching. IT HAS ALSO BEEN SHOWN TO BE A SIGNIFICANT CAUSE OF INJURY.
2. PLEASE WATCH YOUR SMALL CHILDREN!! Keep them free from gym class
3. PICK UP YOUR CHILD PROMPTLY AT THE END OF CLASS! Late parents cause concerns for your child and it is a safety issue. A \$1.00 per minute daycare fee will be charged if this becomes a problem.
4. KNOW WHO IS PICKING UP YOUR CHILD.
5. WE RESERVE THE RIGHT TO EXCLUDE ANY CHILD WHO CREATES A SAFETY PROBLEM.

Please fill in the following information:

Gymnast name _____ DOB _____ AGE _____

Parent/Guardian _____ Address _____

Cell Phone _____ Text YES or NO

Emergency Contact name and phone # _____

Email _____

Insurance Company _____

The following is a list of conditions/allergies _____

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WARNING

BY THE VERY NATURE OF THE ACTIVITY, GYMNASTICS CARRIES A RISK OF PHYSICAL INJURY.

Gymnastics carries with it a risk of physical injury. No matter how careful the coaches or spotters are, risk can only be reduced, not eliminated.

These injuries can include:

1. Minor Injuries
 - a. Bruises
 - b. Calluses
 - c. Scratches
2. Serious Injuries
 - a. Muscle Pulls
 - b. Dislocations
 - c. Broken bones
 - d. Concussions (concussion protocol will be strictly followed)
3. Catastrophic Injuries
 - a. Paralysis
 - b. Death

To help your child reduce the risk of injury please follow the rules of the gym listed previously.

I, _____ have read this warning and understand that gymnastics has these and other risks inherent to the sport. I have also read and understand the payment schedule for my gymnast. I understand that the \$45.00 registration fee is an annual fee to be paid each year on the month of the initial registration date

Parent/Guardian signature _____ Date _____

Date \$45.00 registration fee paid _____