

## AirBound Tumbling and Cheer LLC

Student's Name:	Date of Birth:		
Address:	City:	State:	Zip:
Mother's Name:	Father's Name:	Phone:	
Cell Phone:	Email Address:		
Emergency Contact:	Relationship:	Phone:	
Medical concerns or allergies v	ve should be aware of:		
	TERMS AND CONDITIONS OF ENR	OLLMENT	
CERTIFICATION OF AUTHORIT	Y - I/We, the undersigned, hereby warrant that I/we	a are the quetodial parent(a) a	ad/or lowful quardian(a) of
	have lawful authority to make and execute this agr		
n physical exercise and activities sports which could cause inherent above-named's actions, or inaction	UMPTION OF RISK - I/We hereby acknowledge that involving various gymnastics and acrobatic equipmerisks including, but not limited to injury, partial or tot ns, those of others participating in the event, the ceither not known to me or not readily foreseeable st, and damages incurred.	ent and facilities, coordination e tal paralysis, and death. Such i conditions in which the event to	vents, fitness training, and njury(s) may be caused by akes place, or negligence;
nature, for personal injury (includir and Cheer, LLC's facilities (or els	hereby waive any and all liability and claims, pasing death) arising out of or connected with the herein sewhere under AirBound Tumbling and Cheer, LLC cers, directors, agents, and employees from any and	above-named minor's participa C control or supervision), I/We	ition at AirBound Tumbling
	by covenant and agree to hold harmless and inde hereof made by or on behalf of any person or leg		
as to whether or not the hereinab that may impact upon his/her abili It is my/our responsibility to obtain	HYSICAL EVALUATION - AirBound Tumbling and ove-named minor is physically fit of any exercise a sty to engage in these activities, and/or which condition a physician's statement describing any limitation to s. I/We acknowledge that it is always advisable to togram.	ctivity, and that if such minor hon may be aggravated or exact participate in the programs,	nas any physical condition erbated by these activities, activities, and /or to make
RULES AND REGULATIONS - A	All students, parents, relatives and guardians agree	e to abide by the rules and re	gulations set by AirBound

Tumbling and Cheer, LLC for the health, safety and welfare of the students. AirBound Tumbling and Cheer, LLC reserves the right to dismiss any student whose conduct or influence is deemed unsatisfactory without refund.

INSURANCE NOTIFICATION - Student is required to have personal insurance coverage, which covers cost for accidents or injuries. In addition, in case of medical emergency, I hereby give permission to AirBound Tumbling and Cheer, LLC, via my signature to secure proper medical treatment for the student listed above.

## **PAYMENT AGREEMENT**

I/We agree to make full tuition payments, unless notification of intent to cancel is made two weeks in advance by completing the Drop Form at the front desk. I also agree to pay a \$10 late fee if full payment is not made or if payment doesn't clear before the last week of each session.

By signing below I (Student (if 18 years of age), Parent or Guardian) irrevocably state that I fully understand the terms and conditions set forth above by AirBound Tumbling and Cheer, LLC and agree with the terms and conditions stated in this agreement. You have my permission to take and use photographs of my child in advertising purposes via Print I Internet I

I HAVE READ THROUGH ALL OF AIRBOUND'S POLICIES AND PROCEDURES AND AGREE TO THEM

Date: Signature:
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