

GYM CITY
1393 W. Tyson Rd.
Portland, IN 47371
(260) 726-3991

Registration Form

Date _____

Parent/Guardian Name _____

Address _____ Phone _____ Alternate Phone _____

Gymnast Name: _____ Birthday: _____

_____ Birthday: _____

_____ Birthday: _____

Emergency Contact (other than child's parents)

Name _____ Phone: _____

Name _____ Phone: _____

Please list all individuals who are allowed to pick your child up: _____

Please inform Gym City Gymnastics of any physical or medical condition that the gymnast has:

Please list the gymnast's insurance carrier: _____

(Insurance coverage is required from all Gym City Gymnastic Class/Team gymnasts)

I understand that Gym City is not to be held responsible for any liability issues that may result from being a member of its program. I do have an insurance policy that will cover my gymnast in the event of an accident.

Class _____ Day/Time _____

I understand that I am to drop my child off and pick my child up after class by entering the facility. I understand that my child will not be allowed to walk out of the building without appropriate escort. I understand that Gym City Gymnastics is not a baby-sitting program and will have my child picked up within 10 minutes after class. I understand that if I do not pick my child up after the 10 minute grace period, I may be assessed a \$3.00 charge per 1/2 hour.

I have read and fully understand this registration form. I am agreeing to have my class fee payable on or before the 7th of each month or pay a late fee in the amount of \$7.00. Also by signing below, I am agreeing to allow my child's name and/or picture to be used for program publicity, on web site, etc.

Please initial here, stating that you received a Holiday/Closing and Make-up Policy. _____

_____ Date _____

Parent/Guardian Signature

GYM CITY
Programs Offered September through May

CLASS	DAYS & TIMES	MONTHLY FEE
Preschool	45 minutes – 1 time per wk	\$35.00
Mini Preschool	30 minutes – 1 time per week	\$32.00
Beginners	1 hour – 1 time per week	\$35.00
Intermediate	1 hour – 1 time per week	\$35.00
Advanced	1 ½ hour – 1 time per week	\$48.00
Prep 1	1 hour – 2 times per week	\$52.00
Prep 2	1 ½ hour – 2 times per week	\$58.00
Pre-Team	2 hours – 2 times per week	\$68.00
Team	Level 4– 7 Hrs/Wk Level 5/6– 9 Hr/Wk	See Office
Cheerleading	1 hour 15 minutes 1 time per week	\$40.00
Boys Body Conditioning	1 hour – 1 time per week	\$35.00
CheerNastics	1 ½ hour – 1 time per week	\$48.00
Private Lessons	½ hour schedule with instructor	\$12.00
Private Lessons	1 hour schedule with instructor	\$20.00
OPEN GYM	1 ½ hour – 1 time per week (Sat)	\$4.00 Team = \$2.00

Save \$10.00 on monthly fees with two in family
 Save \$15.00 on monthly fees with three in family
 Save \$20.00 on monthly fees with four/+ in family
 Save 12% off total fees per nine month session if paid before or on 1st lesson

In addition to these monthly fees, there is a Registration Fee of \$25.00 (\$10.00 for each additional family member) payable only on time per year. (Registration fee is only %12.00 after January)

Gymnasts are entitled to make up classes for each class that they have missed, however, it is up to the family to make arrangements with the Office Manager to reschedule. All make-ups **MUST** be made up in the month that they missed. **NO EXCEPTIONS! There will be no make-ups scheduled for our Holiday/Gym Closings.**

All monthly fees are due by the 7th of each month regardless when you first class of the month falls on. There will be a late fee in the amount of \$7. assessed after the 7th of the month. There will be a late fee due for payments made after the 7th of each month (unless other arrangements have been made with the Office Manager).

There will be assessed a \$25.00 fee for all returned checks. After one returned check, the family needs to make money orders or cash payments.

Gymnast Name: _____ Day/Time of Class: _____

I, _____, have read and understand the payment policy for Gym City Gymnastics. I understand that each month, before the 7th, I owe \$_____. I may mail or deliver my monthly fees to GCG 1393 W. Tyson Rd., Portland, IN 47371

Parent/Guardian Signature

Date _____