

Jay Rock's Gym Enrollment Form

TO COMPLETE ENROLLMENT
YOU MUST READ AND SIGN!

Please Print:

Student's Last Name	Student's First Name	Birth Date	Age	Gender
Parent's Last Name (If Different)	Parent's First Name	Cell Number	Home Number	
Mailing Address (Street, Apt #, Box, etc.)		City / State		Zip Code
Emergency Contact Name	Emergency Contact Number	Student's Medical Conditions		
PLEASE WRITE YOUR EMAIL ADDRESS IN THE SPACE PROVIDED BELOW				

- I will pay tuition by the 1st of each month for the following month regardless if I receive a statement. A \$15 late fee will be charged after a 5-day grace period. I also understand that failure to pay by the 15th of the month will also result in a \$50 re-registration fee before my child may continue in such class. Payment must Continue for classes without 30 days written (email) notice.
- If paying by credit card or auto check submission, I acknowledge I will continue to be charged Providing I DO NOT give the gym 30 days notice of quitting or taking a break from a class.
- I understand that every student must pay an initial enrollment fee of \$50 and on each anniversary date of their initial enrollment a \$25 fee must be paid for the student to continue, due to the liability factor.
- I understand that there will be a \$20 charge for any check that is returned, regardless of the reason.
- I acknowledge that potentially severe injuries may occur in any activity involving height or motion, and it is the express intent of the owner and/or staff to provide for the safety and protection of its participants. Should sickness or injury occur, I hereby give my permission for trained medical professionals to be notified immediately and to administer emergency medical treatment, if deemed necessary, to the above named student. In consideration for permitting the above named student to participate in activities, I hereby release the owner and staff from all liability and for any and all damages resulting from injuries suffered by the above named student while under the instruction, supervision of said owner and staff.

I have read the statements above, as well as read and understand the “Gym Policies” sheet (separate sheet) and by signing below I hereby agree to comply with both.

Signature of Parent / Guardian

Date