

# Gymnastika Registration Form

Sept. 2024- Aug 2025

Please fill out clearly. Read and sign both front and back pages.

Student: \_\_\_\_\_ Boy: \_\_\_\_\_ Girl: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Last Name) (First Name)

Street Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Most Accessible E-Mail \_\_\_\_\_ @ \_\_\_\_\_ .

Legal Guardian: \_\_\_\_\_ Cell #: \_\_\_\_\_

Legal Guardian: \_\_\_\_\_ Cell #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name(s) of Siblings Currently Enrolled: \_\_\_\_\_

Medical Problems: \_\_\_\_\_

Previous Lessons: Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, # of Years \_\_\_\_\_ where: \_\_\_\_\_

How did you hear about us?! \_\_\_\_\_

## CLASS INFORMATION & ACKNOWLEDGEMENT

Starting Session: (Circle One)

1 2 3 4 5

Tuition & Fees:

Class Name: \_\_\_\_\_

Registration Fee:..... \_\_\_\_\_

Tuition for Session:..... \_\_\_\_\_

Discount (Sibling/ 2<sup>nd</sup> class ): ..... \_\_\_\_\_

Class Day /Time : \_\_\_\_\_

Deposit (1<sup>st</sup> session only ) ..... \_\_\_\_\_

Total..... \_\_\_\_\_

Balance Due (1<sup>st</sup> session only)..... \_\_\_\_\_

As legal guardian of the above named student, I certify that he/she is physically fit to perform in all programs at *Gymnastika*, is not currently under medical care, and is not receiving medication for any condition which would limit participation in any way, except listed above. I recognize that potentially severe injuries including virus, sprains, broken bones, paralysis or death can occur in any activity involving height or motion and that this risk can never be totally eliminated, even under the supervision of properly trained and qualified instructors using modern & safely designed equipment. *Gymnastika*, its coaches and other staff members, will not accept responsibility for injuries sustained by any student during the course of gymnastics instruction, open workouts, or in the course of any exhibition, competition, or clinic in which he or she may participate in.

I have read and understand the *Gymnastika* Rules & Policies attached or contained on the front and back of this Registration Form.

**X** \_\_\_\_\_

Legal Guardian Signature

Date

[www.GymnastikaNJ.com](http://www.GymnastikaNJ.com)

Over 30 years of training champions, since 1993.



Gymnastika  
10 Andrews Drive  
Woodland Park, NJ 07424  
P: (973) 812 - 7447

E: [info@GymnastikaNJ.com](mailto:info@GymnastikaNJ.com)

# GYMNASTIKA RULES & POLICIES

**REGISTRATION FORM** (both pages) must be completed and signed BEFORE the student can participate.

**REGISTRATION FEE** is required each year (September 1<sup>st</sup>- August 31<sup>st</sup>) or any portion thereof.

**PARENTS ARE RESPONSIBLE** for warning their children about the potential dangers of gymnastics.

**TUITION** is due **before** the first scheduled class of each 8-week session. Your child's space in class will not be held if payment is not received at least 2 week prior to the start of new session. Students registering for the first time during our school year, after the start of the session, receive a prorated discount for that session ONLY. Your registration reserves limited class space. **Failure to attend any or all classes does not reduce or eliminate the tuition charge.** Two weeks in advance notice is required if you desire to stop attending the next session. No refunds or transfers are given. House credit is available only if a government mandated shutdown occurs.

**NO REFUNDS/ TRANSFERS OF REGISTRATION, TUITION OR OTHER RELATED FEES ARE GIVEN.**

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**RETURNED CHECKS** must be paid for in cash along with a Returned Check Fee of \$40.

**MAKE UPS** are available for missed classes up to two per session. Please notify the gym if you will be missing class. Every attempt will be made to reschedule students' missed classes in a similar class during the week. You are required to schedule make-ups through our gym office. NO "Walk- In" Make- Ups are allowed and must be made at least 24hrs before. Make-Ups must be completed in the same session in which they occur and cannot be carried over into a new session of classes. If a Make-Up is scheduled and missed, it still counts as a Make-Up and cannot be rescheduled.

**LOST AND FOUND** articles are kept for two months and then donated to charity. Do not bring valuables to the gym. We will not be responsible for lost or stolen property.

**BAD WEATHER** may, in severe cases, cause the gym to close. If we cancel a class due to bad weather, the class can be rescheduled through a make-up. No credit or refund will be given.

- In the event of an "act of God" including but not limited to natural disaster, illness, pandemic- tuition is not refundable and make up days may not be available. Make up classes are not available during summer classes.

**NO SMOKING** in our building or outside by the open doors facing the gym. No food, drinks or gum in the gym during classes.

**PARENTS OBSERVATION** of classes from behind our glass wall areas is allowed at any time. Parents/Friends may not view classes from inside the gym for safety reasons. Children must be kept under control in the waiting area for everyone's safety (no gymnastics/horseplay). No standing on chairs or benches or in the doorway connecting the waiting areas.

**GYM ATTIRE:**  
**GIRLS: Leotard or shorts/tights & T-Shirt, hair up & pulled back from face.**  
- No crop tops. No jewelry.  
**BOYS: Shorts/Sweats and T-Shirt**  
**BOTH: Bare feet; no shoes.**

X \_\_\_\_\_  
Legal Guardian Initial Date

