



## Registration & Waiver Form

Today's Date \_\_\_\_\_

Family Name \_\_\_\_\_ Student/Athlete(s) Name(s) \_\_\_\_\_

Date(s) of Birth \_\_\_\_\_ School \_\_\_\_\_ Current Grade \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_) \_\_\_\_\_ Mother Cell (\_\_\_\_) \_\_\_\_\_ Father Cell (\_\_\_\_) \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

### Classes

\*If at any time fewer than three students are REGISTERED for a tumbling class that class will be shortened by 15 minutes.

\*A minimum of 3 registered students may be required for each Class.

\*Please plan on attending all scheduled classes. Make up classes are based on class availability during that session only.

### Assumption of Risk

Participation in physical activities can involve motion, rotation, and height in a unique environment and as such carries with it a certain assumption of risk. The undersigned and the participant(s) choose to voluntarily enter upon said premises under the control of Competitive *EDGE* Athletics (CEA), knowing their present condition and knowing that said condition may become more hazardous and dangerous during the time the participant or the undersigned is upon said premises. The undersigned and the participant(s) voluntarily assume any and all risks of loss, damage, or injury that may be sustained by the participant(s) and/or the undersigned or any property owned by them while on or upon said premises described above. In signing this Release, the undersigned acknowledges:

- That he/she has thoroughly read and understands completely, the terms of Registration and Release and signs it voluntarily,
- That the undersigned signing either for themselves, or as Legal Guardian is, in fact, the true and legal guardian and has the consent of the participant.

### Release of Liability

I (we), despite all reasonable precautions implemented for safety, am (are) fully aware of and appreciate that severe injuries, including permanent paralysis or even death, as well as other damages and losses associated with participation in the programs or activities at Competitive *EDGE* Athletics (CEA) can occur in sports or activities involving height or motion, those activities including, but not limited to, tumbling, trampoline, dance, and cheerleading. Being fully aware of these dangers, I (we) hereby give consent for my child(ren) to participate in any and all CEA programs. In consideration for my child(ren's) participation, I (we) hereby for myself and my child(ren) and our respective heirs, executors and administrators, covenant not to sue and forever release CEA, the owners, operators, executors, directors, officers, employees and other members of CEA for personal injury or accident of any sort or nature suffered by me (us), the undersigned, by reason of participation or membership in classes, lessons or any programs or activities of CEA including those resulting from acts of negligence. I (we) also assume all medical expenses for the aforementioned child(ren) or myself, who may be the result of any injuries sustained while training at or performing for CEA. Further, it is affirmed that sufficient insurance covering all such injuries and damages shall be in full force and effect throughout the program or its equivalent.

I have read the above and agree.

\_\_\_\_\_  
Parent(s)/Legal Guardian(s)

\_\_\_\_\_  
Date

**(Continued on page 2)**

Family Name: \_\_\_\_\_

**Medical Emergencies**

In any event of an accident or emergency, I (we) hereby authorize my child to be transported to a hospital for medical treatment and I (we) hold Competitive *EDGE* Athletics (CEA) and its representatives harmless in the execution of such. Additionally, I hereby agree to individually provide for all medical expenses which may be incurred by me or my child(ren) as a result of any injury sustained while participating at or for CEA.

I (we), the minor's parent(s) or legal guardian(s), understand the nature of the activities my child(ren) will be involved in at CEA and the minor's experience and capabilities, and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activities. I (we) hereby release, discharge, covenant not to sue and agree to indemnify and save and hold harmless each of the releasees from all liability claims, demands, losses, or damages on the minor's account caused or alleged to be caused, in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations. I further agree that if, despite this release, I (we), the minor, or anyone on the minor's behalf make(s) a claim against any of the releasees named above, I (we) will indemnify, save, and hold harmless each of the releasees from any litigation expense, attorney fees, loss liability, damage, or any cost that may occur as the result of such claim.

**Marketing Release**

I (we) understand and consent that my child's likeness may appear or be used in Competitive *EDGE* Athletics related advertising, promotional videos, photos, website material, or various other marketing tools.

**Payment Policy**

There is a \$50.00 annual registration fee per student or \$75.00 per family due before the first class. Class tuition is due on the first of the month. Payments for all fees can be made in person at the front desk or pro shop. Credit card information is required for registration but your card will not be charged at this time. If you do not have a credit card you must register in person and provide your eCheck information. If tuition is not paid by the fifth of the month, your credit card or eCheck will be charged on the sixth, plus an additional \$10.00 late fee. Declined credit card charges or returned checks will result in a \$30.00 fee. If delinquent accounts are not reconciled within two weeks, the student will be dropped from the class. A re-enrollment fee of \$20.00 will apply. Bank account information shall be current, active and drawn on a local bank only. No out of state checking accounts will be accepted as a form of security. We honor Visa, MasterCard and American Express.

**Credit or Bank Draft Authorization Agreement**

I hereby authorize Competitive *EDGE* Athletics, to charge my credit card or checking account for classes at Competitive *EDGE* Athletics, including, but not limited to, registration and tuition. (Note: Fees are subject to change) I understand that once the monthly drafts for my tuition have occurred, there will be no refunds given if I decide to drop for the month billed. I agree to notify Competitive *EDGE* Athletics of any change in the status of my charge account, including but not limited to card expiration, name change, limitation of use, loss or theft of the card, etc. In the event that the amount charged is refused for whatever reason, I accept responsibility for the amount charges as well as the NSF fee of \$30.00.

I have read the above and agree.

\_\_\_\_\_ Date \_\_\_\_\_  
Parent(s)/Legal Guardian(s)

**Credit Card Verification:**



Name as it appears on the card: \_\_\_\_\_

Card Type: \_\_\_\_\_ Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Thank you for registering with Competitive *EDGE* Athletics! If you provided an email address, you should be able to access the customer portal through our website at [www.ce-athletics.com](http://www.ce-athletics.com) in a few days.