



GYM FORCE REGISTRATION, LIABILITY AND ASSUMPTION OF RISK WAIVER AND AGREEMENT

REGISTRATION	_____
1 ST MONTH	_____
LAST MONTH	_____
TOTAL	_____

⊕ Welcome to Gym Force

Please fill out all the information below and read and sign the participation waiver on the back to begin registration. All fees are due at time of registration. \$35 Registration Fees are non-refundable.

⊕ Customer Information

Home Phone: () _____ Customer Name: _____ Person Paying on Account _____
Home Address: _____ City / St / Zip _____
Email Address: _____ Emergency Contact: _____

⊕ Participant Information

1. _____	Male / Female	Date of Birth	_____ / _____ / _____
2. _____	Male / Female	Date of Birth	_____ / _____ / _____
3. _____	Male / Female	Date of Birth	_____ / _____ / _____

⊕ Payment Plans and Options. Please select and Initial

_____ **OPTION A:** Monthly Tuition paid with Credit / Debit Card. **See Authorization Form Below**
This option will NEVER have a late payment fee assessed.

_____ **OPTION B:** Monthly Tuition paid monthly by check. If payment is NOT RECEIVED by the 5th of each month a **\$20.00 Late Payment fee** will be assessed.

⊕ “AUTO BILL” Credit or Debit Card Authorization

Automatic Payment Authorization for Credit/Debit Cards

Card Holders Name _____
Street (CC billing address) if different from above _____
City, State, Zip _____
MasterCard _____ Visa _____ Debit _____
Account Number _____ Expiration Date _____ / _____
Monthly Draft amounts \$_____ This is your Monthly Tuition Costs.

I hereby authorize monthly tuition payments, as shown above, to be drafted from the account designated above. In the event that I change my credit card service to a different bank or different account, I will notify Gym Force Inc. in writing at least 5 days prior to the date of my next scheduled automatic payment. As agreed on the Gym Force Registration Agreement I will give a 30 day written notice to Gym Force Inc. If for any reason I withdraw my child from Gym Force Inc. with out the 30 day written notice of withdrawal I understand that the Auto Bill will be processed during this 4 week withdrawal notice period.

I hereby authorize drafts from my credit / debit account only as specified above.

Print Name _____ Date _____ / _____ / _____
Card Holders Signature _____

Class: _____
Day: _____
Time: _____

“Registration Agreement”

⊞ Gym Force Rules & Policies

- It is the responsibility of the parent(s) / guardian to see that their child is picked up immediately after class.
- GYM FORCE, Inc. allows only one (1) make-up per month. Make-ups are granted for health reasons only and are to be arranged through the office personnel in specific classes designed for make-ups
- GYM FORCE, Inc. requires a \$35.00 registration fee per participant. This fee is non-refundable.
- GYM FORCE, Inc. requires that the First and Last month’s tuition be paid with this Registration Agreement. This allows you to decide how long you would like you child to participate in our program.
- Withdrawal from the GYM FORCE program requires a (30) thirty-day written notice. At that time the last months prepaid tuition will be applied to the last month of tuition, provided that your account balance due is equal to \$0.
- Tuition is due by the 5th of each Month. If not a **LATE FEE OF \$20.00 WILL BE ASSESSED** to your account. Please take advantage of our “AUTO-BILL” and this will never happen.
- GYM FORCE, Inc. has a \$25.00 charge for returned checks.

By Signing below I understand these important Policies of GYM FORCE, Inc., and agree to abide by them.

Signature

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement (“Agreement”)

⊞ MINOR PARTICIPANT:

In consideration of participating in the Gym Force, Inc. I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity. I fully understand that this Activity involves risks of serious injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the “releasees” named below; and that there may be other risks either known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in this Activity.

I hereby release, discharge, and covenant not to sue Gym Force, Inc. its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered on of the “RELEASEES” herin) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the “Releasees” or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as a result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Participant 1 *

Signature of Participant 1*

Date

Printed Name of Participant 2*

Signature of Participant 2*

Date

Printed Name of Participant 3*

Signature of Participant 3*

Date

*Parent or Legal Guardian should sign the name of the minor if the minor is not old enough to sign the waiver themselves

Parental Consent:

AND I, the minor’s parent and / or legal guardian, understand the nature of the above referenced activities and the Minor’s experience and capabilities and believe the minor to be qualified to participate in such activity. I 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 have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the Minor, or any one on the Minor’s behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost and Releasee may incur as the result of any such claim.

Printed Name of Parent / or Legal Guardian

Signature of Parent / or Legal Guardian

Date

⊞ ADULT PARTICIPANT:

In consideration of participating in the Gym Force, Inc. I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity. I fully understand that this Activity involves risks of serious injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the “releasees” named below; and that there may be other risks either known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in this Activity.

I hereby release, discharge, and covenant not to sue Gym Force, Inc. its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered on of the “RELEASEES” herin) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the “Releasees” or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as a result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Adult Participant

Signature of Adult Participant

Date