

MANDEVILLE SPORTS COMPLEX RECREATIONAL GYMNASTICS APPLICATION

Form can be processed at front desk or emailed to: Info@MandevilleSportsComplex.com. When we receive email, we will contact for class placement and payment.

Coach	Code	Day	Time	Tuition
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1st Child: _____ Nickname: _____

Birthday: _____ Age: _____ Gender: _____

Coach	Code	Day	Time	Tuition
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2nd Child: _____ Nickname: _____

Birthday: _____ Age: _____ Gender: _____

Home Address: _____

City, State, Zip: _____

EMAIL ADDRESS: _____

School: _____ Grade: _____

Mother: _____ Father: _____

Employer: _____ Employer: _____

Work#: _____ Work#: _____

Cell#: _____ Cell#: _____

Parents Marital Status: _____ Custodial Parent: _____

Please take time to review the rules and guidelines attached.

Welcome to Mandeville Sports Complex! We are excited for your child to begin gymnastics/tumbling classes here at MSC.

- * If you are unsure what level to enroll your child, they will be placed in the lower level and will be evaluated during the first class and if needed will be moved up to next level.
- * No shoes on gym floor. Shoes are placed in cubbies in lobby.
- * No food or drink on gym floor; water only
- * Children should wait in lobby for your coach to call their class.
- * At the end of each class, you can meet your child at café floor exit and they will receive a lollipop.
- * Parents are not allowed on gym floor at any time.
- * Parent must supervise their children in lobby, café and restrooms.
- * No running or tumbling in lobby or in and around bathrooms.
- * No one allowed upstairs.
- * No climbing, standing or jumping off bleachers.
- * Please refrain from standing at windows (distracts children during class).
- * Children are not allowed to sit or stand on café counters.
- * Café is open for purchases.
- * No one is allowed to stand in doorways.
- * Every adult and child must fill out a waiver.
- * Siblings can pay \$10.00 per visit to play in Diamond Mine area. Ages 4-12 during the hours of 5-8pm Mondays-Thursdays.
- * During Week 9 of each session, evaluations for the next session will be done. If your child is moving up, they will receive a certificate.

*There will be no classes during Mardi Gras, Easter and Thanksgiving breaks. The session will still be 9 weeks long.

*There are no make up classes

Thank you for choosing Mandeville Sports Complex!

Parent Signature: _____

Date: _____

Party Responsible for Payment:

Name: _____ Relationship: _____

Phone: _____

Payment of session fee is due in FULL prior to the start of a session in order to hold a spot for your child. **Refunds will not be given**. If your child attends a class, your child will be considered enrolled and you will be billed for the balance due. **No makeup classes**. A \$25.00 service fee will be assessed for all returned checks. **Once you register for a Session, you cannot change class, hour, time or day without coach and gym manager permission. Credits will not be issued due to a conflict in your personal schedule or a \$25.00 fee will be deducted.**

Emergency Contacts:

Name	Relationship	Phone
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Name	Relationship	Phone
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Health:

Is student on any Medication? _____ If so, what medication? _____

List any previous injuries, accidents, medical conditions or surgeries:

Does student have any allergies? _____ If so, what allergies? _____

Please rate student's general health: Excellent Good Fair Poor

Students Physician: _____ Phone: _____

Insurance Provider: _____ Policy #: _____

How did you find out about Mandeville Sports Complex?

Child's Name (Please Print): _____

Parent/Guardian (Please Print)

Parent/Guardian Signature

Date

MSC Representative

CONTRACT OF WAIVER & RELEASE OF LIABILITY

DISCLAIMER: MANDEVILLE SPORTS COMPLEX, INC. IS NOT RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON WHILE PRACTICING, TRAINING, TAKING CLASS, or COMPETING in GYMNASTICS OR CHEER OR PARTICIPATING IN KIDS FUN NIGHT, SUMMER CAMP ACTIVITIES, HOLIDAY CAMP ACTIVITIES, SWIM PROGRAMS, BEFORE/AFTER SCHOOL CARE, BIRTHDAY PARTIES, VOLLEYBALL, BASKETBALL, FLAG FOOTBALL OR SPECIAL EVENTS, DEMONSTRATIONS, OR SHOWS, OR IN ANY OTHER WAY INVOLVED IN ACTIVITIES AT MANDEVILLE SPORTS COMPLEX, INC. FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF MANDEVILLE SPORTS COMPLEX, INC. ITS OWNERS, OFFICERS, AGENTS, OR EMPLOYEES.

In consideration of my participation, I hereby release and covenant not-to-sue MANDEVILLE SPORTS COMPLEX, INC. the MANDEVILLE SPORTS COMPLEX, INC. Board of Directors and officers, the MANDEVILLE SPORTS COMPLEX, INC. and any of their employees, teachers, coaches, or agents, from any and all present and future claims resulting from ordinary negligence on the part of MANDEVILLE SPORTS COMPLEX, INC. or others listed for property damage, personal injury, or wrongful death, arising as a result of my engaging in or receiving instruction in gymnastics, cheerleading or any other activities or any activities incidental thereto, wherever, whenever, however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, heirs, or assigns.

Further, I am aware that gymnastics and cheerleading are vigorous sporting activities involving height and rotation in a unique environment and as such they pose a risk of injury. I understand that gymnastics, cheerleading, and related activities always involve certain risks, including but not limited to, death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and serious injury to virtually all bones, joints, muscles, and internal organs, and that the mats, pits, and other safety equipment and apparatus provided for my protection, including the active participation of a coach or teacher who will spot or assist in the performance of certain skills, may be inadequate to prevent serious injury. The risk of harm may be limited by all of the safety equipment and trained coaches, but never eliminated. I understand that participation in gymnastics and related activities involves activities incidental to active participation in gymnastics, including moving from event to event, conditioning, stretching and other activities which may leave me vulnerable to the reckless actions of other participants who may not have complete control over their actions or who may not see other students in the gym. I am voluntarily participating in this activity with knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

I further agree to indemnify and hold harmless MANDEVILLE SPORTS COMPLEX, INC. and all others listed for any and all claims arising as a result of my engaging in or receiving instruction in activities incidental thereto, whenever, wherever, or however the same may occur. If an injury occurs, the party hereby contracts and agrees that their individual medical coverage is deemed primary in any and all situations.

I give permission to MANDEVILLE SPORTS COMPLEX, their officers and staff, to provide medical treatment in case of an emergency or injury.

I further authorize MANDEVILLE SPORTS COMPLEX the irrevocable right to use photographs of my child and myself in all forms, media and manners, without restriction for advertising, promotion, or any other lawful purposes.

I understand that this waiver is intended to be as broad and as inclusive as permitted by the laws of the state of Louisiana and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be within the state of Louisiana.

I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and or remedies which may be available to me for the ordinary negligence of MANDEVILLE SPORTS COMPLEX, INC. or any person/entity listed above.

Waiver is being signed for Parents/Guardians and Children accompanying them while at MSC

Child(ren) Name(s) (Please Print): _____

Parent/Guardian's Name (Please Print): _____

Parent/Guardian Signature: _____

Date: _____

Revised 1-19-16