

Summer 2022 AcroKids Registration Form

Last Name: _____

3/01/2022

Students Last Name First Name M/F Sex Age Birth Date

Students Last Name First Name M/F Sex Age Birth Date

Mom's Last Name Mom's First Name Dad's Last Name Dad's First Name

(_____) (_____) @_____
Mom's Cell Phone Dad's Cell Phone Email Contact (required for all students)

Street Address City Zip Code

REQUIRED POLICIES AND AGREEMENTS

Location

I understand that classes marked SFW will be held at the Friendswood Location and classes marked SLC will be held at the League City Location. It is my responsibility to make sure I sign up for the location that I would like my child to attend.

SFW = 1800 W. Nasa Blvd, Webster, TX 77598

SLC = 2705 Dickinson Ave, League City, TX 77573

_____ I've read and agree to the above policy

Assumption of Risk and Waiver of Liability

As legal guardian of the above named persons, I RECOGNIZE AND FULLY UNDERSTAND THAT POTENTIALLY SEVERE INJURIES, INCLUDING PERMANENT PARALYSIS OR DEATH can occur in sports or activities involving height or motion, including but not limited to gymnastics, tumbling, trampoline, martial arts, dance, birthday parties, open gym, etc. These risks and dangers may be caused by my own or my child's actions, or inactions, the actions or inactions of others participating in the Activity, or the negligence of USAcroSports, Incorporated, AcroSports Gymnastics and AcroKids Academy. (collectively AcroSports), officers, directors, shareholders, or other representatives, whether paid or volunteer. BEING FULLY AWARE OF THESE DANGERS and in consideration of the minor being permitted to participate in activities at this facility, or the use of equipment on and off premises owned by AcroSports or affiliated companies I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I, or my child, incur. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS USAcroSports, Incorporated on my own behalf and the behalf of my child and our respective heirs, administrators, executors, and successors, its officers, directors, shareholders, employees or other representatives, whether paid or volunteer, FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES, WITHOUT LIMITATIONS, ON THE MINOR'S ACCOUNT OR MINE caused or alleged to be caused in whole or in part by the negligence of USAcroSports, Incorporated, its officers, directors, shareholders, employees, or agents.

I affirm that I am the LEGAL Guardian of the child/ren I am signing up and have full LEGAL authority to do so. If I am found in violation of this I will be asked to leave with no refund.

_____ I've read and agree to the above policy

Student Allergies/Medical Conditions/Physical RestrictionsI confirm that my child does/does not have any medical conditions stated below. I understand that I may be asked to provide a signed physician's note in order for my child to participate in any programs provided by USAcroSports, Incorporated.

(if none, please write N/A)

Allergies _____

Special Needs _____

Restrictions _____

_____ I've read and agree to the above policy

Consent to Emergency Medical Treatment/Medical Insurance

I confirm that my child is in good health and that I currently provide medical insurance for my child and will continue to provide medical insurance while he/she is enrolled in any programs provided by USAcroSports, Incorporated. I/We do hereby authorize any adult officer, director, supervisor, instructor or employee of USAcroSports, Incorporated, d/b/a AcroSports Gymnastics and AcroKids Academy who has care and control of the student to consent to any medical treatment of the student when I/We cannot be contacted pursuant to 35.01 of the Texas Family Code which, in the judgment of any perspective treating doctor, is immediately and medically necessary to treat any injury sustained by the student.

_____ I've read and agree to the above policy

Arbitration

I/We do hereby agree that any and all disputes, controversies, claims or demands, including but not limited to personal injuries, arising out of or related to this agreement or any provisions thereof, the services provided to me and/or the student, or in any way relating to the relationship with US AcroSports, Incorporated, its officers, directors, supervisors, agents or employees, whether in contract, tort or otherwise, for damages or any other relief, shall be resolved by binding arbitration at the request of either US AcroSports, Incorporated, or me under the arbitration rules of the American Arbitration Association unless otherwise mutually agreed on another arbitration procedure, and US AcroSports, Incorporated and I are waiving our right to a trial by jury. I affirm that I am the LEGAL Guardian of the child/ren I am signing up and have full LEGAL authority to do so. If I am found in violation of this, I will be asked to leave with no refund.

_____ I've read and agree to the above policy

Participant Agreement, Release and Assumption of Risk

In consideration of the services of US AcroSports, their agents, owners, officers, volunteers, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "US A"), I hereby agree to release, indemnify, and discharge US A, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in any amusement activities entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. The risks include, among other things: slips and falls; tripping hazards; collision with fixed objects or people; participants often fall or run into on each other resulting in broken bones and other serious injuries; colliding with others which could cause strains, sprains, broken bones and head injuries; cuts, abrasions, and bruises; heat exhaustion, heat stroke, and cardiac related events or illness; musculoskeletal injuries including head, neck, and back injuries; equipment failure or operator error; the negligence of other participants, or other persons who may be present; concussions; whiplash; equipment failure

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or operator error; condition of the field or track; my own physical condition, and the physical exertion associated with this activity. In any event, if you or your child is injured, you or your child may require medical assistance, at your own expense. Furthermore, US A personnel have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

2. Indemnity, release and hold harmless agreement in favor of US A. I hereby voluntarily release, forever discharge and agree to indemnify and hold harmless US A from any and all claims, demands, or causes of action based upon or arising out of injuries, including death, to persons, or damages to or destruction of property, sustained or alleged to have been sustained in connection with, arising out of, or in any way related to my participation in this activity or my use of US A's equipment or facilities, including any such claims, demands or causes of action which are based or founded, in whole or in part, upon the alleged negligent acts or omissions of US A.

3. Should US A or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs. In the event that I file a lawsuit against US A, I agree to do so solely in the state of Texas, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect. By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against US A on the basis of any claim from which I have released them herein.

4. I further acknowledge, understand, appreciate and agree that my participation and that of my children may result in possible exposure to and illness from infectious diseases, including, but not limited to, MRSA, Influenza and Covid-19. I acknowledge that US A will take measures to limit this exposure as recommended by the federal, state, and local authorities, and that US A is not able to guarantee that exposure will not happen within the facility. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I knowingly and freely assume all such risks, both known and unknown, even arising from the negligence of the releasees or others, and assume full responsibility for my participation and exposure. I will also not bring my child to AcroSports/AcroKids Academy if running a fever of 100.4 or higher, have head lice or showing symptoms of COVID or Flu.

I agree that this document is valid for subsequent visits and participation at US A. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

_____ I've read and agree to the above policy

Tuition AutoBilling

I (we) hereby authorize USAcroSports, Inc. , dba AcroSports Gymnastics and AcroKids Academy (THE COMPANY) to automatically bill my credit or debit card with the number and expiration date below for my child/children's monthly tuition on a monthly basis. This authority will remain in effect until the end of the Summer Session (August 13, 2022). If my child's tuition increases, THE COMPANY will automatically charge the increased amount. Should I wish to charge additional items (pro shop, entry fees, special events, etc.) I will notify AcroSports in each instance. I understand that regardless of the location my child attends all billing will be processed with the address 1800 W Nasa Blvd, Webster, TX 77598

_____ I've read and agree to the above policy

2022 ACROKIDS ACADEMY SUMMER DATES

Summer 2022 begins May 31st and ends August 19th. We offer three (3) options for Summer enrollment. You can enroll your child/ren for the FULL Summer (Mon-Fri), FULL PART-TIME Summer (Mon-Wed), SELECT FULL WEEKS Summer (Mon-Fri) or SELECT PART-TIME WEEKS (Mon-Wed) options.

_____ **I've read the above and agree**

Tuition Policies For Summer

In order to provide the highest quality facility & instruction to our students and to be fair to all parents, AcroSports will strictly enforce the following policies: **Registration Fee:** When enrolling in AcroKids Academy, a non-refundable annual Registration Fee of \$35 will be due for the 1st child, and \$15 each additional child/ren. Registration will be paid in their anniversary month each year thereafter in which child is enrolled. For instance if you enroll in April of 2022 your registration fee will be good until the following April of 2023. Annual registration fees will be auto-billed on the 5th of the anniversary month. Registration Fee is not refundable. **The day of registration when enrolling for the Summer 2022 session you will be charged registration fee if one is owed and will be forfeited if you choose to withdraw your child at any time after registration.**

****If you are enrolling for the FULL TIME (Mon-Fri), \$175 per child is due at the time of registration. This is used to hold your child's spot in the class and will be forfeited if you choose to withdraw your child at any time after registration. Tuition for all students is \$175 per week. Each child has the option of designating ONE vacation week at a 50% discount - requires TWO week notice sent to the director by email. WEEKLY TUITION is charged every FRIDAY for the NEXT week for all students.**

****If enrolling only for PART TIME FULL SUMMER (Mon-Wed), \$125 per child is due at the time of registration. This is used as a deposit to hold your child's spot in the class and will be forfeited if you choose to withdraw your child at any time after registration. Tuition for all students is \$110 per week. WEEKLY TUITION is charged every FRIDAY for the NEXT week for all students.**

****If enrolling only for SELECT FULL WEEKS (Mon-Fri), the first \$25 of tuition PER WEEK is due at registration. Not refundable for any reason. This is used to hold your child's spot in the class and will be forfeited if you choose to withdraw your child at any time after registration. Your weekly tuition of \$175 per week will be billed on the Friday before each reserved week.**

****If you are enrolling for the SELECT PART-TIME WEEKS (Mon-Wed), the first \$20 of tuition PER WEEK is due at registration. Not refundable for any reason. This is used to hold your child's spot in the class and will be forfeited if you choose to withdraw your child at any time after registration. Your weekly tuition of \$110 per week will be billed on the Friday before each reserved week.**

Siblings receive a 10% discount off 2nd child's tuition. Tuition is not prorated for holidays, vacations, illnesses, or weather related closings. Late pickup is charged \$1 per minute after 6:30pm. Excel team gymnasts receive a discount off AcroKids weekly tuition (dependent on number of practice hours per week that happens during child care hours). Withdrawals are permitted with a full 2 week notice sent to keri@acrosports.com (Friendswood) or katrina@acrosports.com (League City), with the drop date falling on a Friday ONLY. Tuition and fees are not refunded when a child drops. Partial weeks are not prorated.

Tuition: Parents or person responsible for payment of tuition must provide AcroKids with a credit or debit card to be billed automatically each month. Credit Card information must be accurate and AcroSports must be notified immediately if the account on file reaches its expiration date or if the account is suspended or closed so that automatic billing can continue. If a credit/debit card is declined, parents will be notified via email and will be given the opportunity to provide updated credit information. If payment is not made within 3 business days after the 5th, a \$15 Late Fee will be assessed. Students will be dropped on the 15th if tuition remains unpaid. A \$35 fee will be

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charged on all returned checks.

AcroKids is willing to work with families who have special circumstances if parents communicate their needs to us. I understand that regardless of the location my child attends, all billing will be processed with the address 1800 W Nasa Blvd, Webster, TX 77598

_____ I've read the above and agree

Ages & Classrooms

Children ENTERING kindergarten through COMPLETED 5th grade are eligible to register for the AcroKids Summer program. All children must be at least 5 years old or turning 5 by Sept. 1, 2022. Students are broken up into classroom groups by age and grade level once enrollment is complete. We have numerous classrooms so each group has an age range of only 1-2 years and 1-2 grade levels.

_____ I've read and agree to the above policy

Summer Program Activities Included in Tuition

AcroKids Academy offers TWO open gym play times daily, ONSITE field trips and OFF SITE field trips, morning and afternoon snacks provided, arts and crafts, computer and board games, two sessions of outside play daily and optional skills class available (additional fee).

Optional Skills Classes and Pricing

Children may enroll in up to one skills-based class per day, so a maximum of 5 classes per week may be chosen for each child. These classes bill on the 5th of each month through the AcroSports billing system. Changes are permitted monthly by email sent to keri@acrosports.com or katrina@acrosports.com by the deadline. Partial months are not refunded if a child drops from the program before their classes end. Skill Class pricing is offered at a discounted rate. The first class is \$69 per month and each additional class \$58.65 per month. Skill class choices are gymnastics, tumbling, ninja and non-competitive cheer.

*****Skills classes are not available when enrolling for part-time or certain weeks****

_____ I've read the above and agree

Missed Classes/Holidays

Tuition will not be refunded or prorated due to missed classes, Memorial Day or for the July 4th Holiday. Three (3) make-up classes will be permitted during the Summer 2022 Session, beginning June 13th. Make-ups must be completed by August 6th - No make-ups permitted during Show-Offs, August 8th - 13th. Make-up classes must be scheduled in advance through AcroKids Directors and are subject to availability. AcroSports cannot guarantee make up classes for missed classes due to acts of god (hurricane, tropical storm, etc).

Arrival & Departure Time

AcroKids Academy is open from 6:30am to 6:30pm Monday through Friday. When necessary, safety and sanitation protocols will be imposed by US A for the safety of all our students, staff, and family. I understand that my family members will be required to adhere to all these protocols, including limitation of spectators, social distancing in public areas, etc. AcroSports classes will begin promptly & late arrivals can be a major distraction! Please arrive early enough if your child is enrolled in skill classes so that your child is ready to participate when class begins. Promptness is also essential when picking up your child. **AcroKids Academy charges \$1 a minute if you arrive after 6:30pm.** All children, including siblings & guests, must remain inside the AcroKids/AcroSports building unless supervised by an adult. We cannot be responsible for children once they leave our building.

_____ I've read the above and agree

Ninja & Gym Attire

Gymnastics, Tumbling, Sports/Combo - Children should wear elastic waistband shorts and a t-shirt or a leotard. No zippers, buttons, stockings that cover the feet, etc. If a student has long hair, please pull back out of his/her face and absolutely no jewelry may be worn.

For Ninja - Students should wear elastic waistband shorts and a t-shirt and **MUST** wear socks AND tennis shoes for class.

For Cheer - Students should wear elastic waistband shorts and a t-shirt and they may go barefoot or wear socks and tennis shoes.

Children are not allowed to wear jewelry into the gym. AcroSports will not be responsible for any lost jewelry or other personal items.

If your child is not wearing appropriate attire, they will not be able to participate in class and will need to schedule a make-up with the AcroKids Director.

_____ I've read and agree to the above policy

Additional Policies

Parent & Sibling Observation - Parents & siblings are welcome to observe classes from the waiting areas. Parents are not permitted in the gym unless enrolled in a parent-tot class. Parents must keep children under control and quiet in the waiting area. Children are not permitted to leave the AcroSports building or be present in the parking area without adult supervision. No skateboards, skates, bikes, etc. are allowed in the parking area. For the comfort of all our customers, parents with crying or unruly children are asked to remove the child from the observation and office areas.

Class/Schedule Changes

Your child's class environment is an important key in a productive and enjoyable class experience. To maintain a consistent environment for children and coaches we allow one class change per month. AcroSports is willing to work with families who have special circumstances if parents communicate their needs to us. If you need to transfer to a different class, please do so at the Front Desk to avoid being charged if you do so online.

Conferences with Instructors & Management - Instructors and management are happy to discuss parent concerns during the session. In order to avoid distracting instructors and students, parents are not permitted to enter the gym to confer with instructors. Parents may contact management and instructors by telephone, email office@acrosports.com or ask the Front Desk to schedule a conference in person.

Photographs and Videos: I also give permission for photographs and videos of my child to be used in print or broadcast media or posted on the internet as deemed appropriate for the promotion of any USAcroSports, Incorporated activities. **We ask that you do NOT use ANY videos and/or photos of other child/ren in print or broadcast media or posted on the internet. If you are sharing videos and/or photos of your OWN child/ren, we ask that you please check that no other child/ren are included or further disciplinary actions will be taken. NO FLASH PHOTOGRAPHY ALLOWED!**

_____ I've read and agree to the above policy

I AGREE TO ALL OF THE ABOVE

Enter your Full Name* _____

Signature _____

Date Signed _____

As the parent/legal guardian of an AcroKids student, I understand and agree to abide by the policies of AcroKids/AcroSports Gymnastics as stated in this document.

(print) Student Last Name First Name (print) Parent Last Name First Name

Parent Signature _____ Date _____

Last 4 Digits of Credit Card Put On File: _____

Full Name on Credit Card: _____

Zip Code of Credit Card put on File _____

CREDIT CARD AUTO-PAYMENT

AUTHORIZATION FORM I (we) hereby authorize USAcroSports, Inc. , dba AcroSports Gymnastics, and AcroKids Academy (THE COMPANY) to automatically bill my credit or debit card with the number and expiration date below for my child/children's monthly tuition on a monthly basis. This authority will remain in effect until THE COMPANY is notified by me (us) in writing via drop@acrosports.com to cancel this agreement. I also acknowledge that, in order to stop my pre-authorized credit card or debit card billing, I must give this written notice prior to withdrawing my child from classes **no later than the 15th** of the child's last month of class. If/When a timely Drop Notice is received to **drop@acrosports.com**, the tuition fee will be charged for the student's last month of tuition and the automatic billing will be canceled. Verbal notice, phone messages, or notice to instructors does not meet this requirement. If Drop Notice is not received by the 15th of a month, AcroSports will charge my last month of tuition to my credit/debit card ***does not apply to AcroSports Summer Session - no drops permitted during Summer Session** *If my child's tuition increases, THE COMPANY will automatically charge the increased amount. Should I wish to charge additional items (pro shop, entry fees, special events, etc.) I will notify AcroSports in each instance.

Parent/Guardian's Signature Date Signed

Cardholder's Signature (if different from parent/guardian) Date Signed

CREDIT CARD AUTO-PAYMENT

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Type of Credit/Debit Card

E-Mail Address of cardholder ****required****

Name of Credit/Debit Cardholder (please print)

Credit Card Number

Expiration Date

Name of Student's Parent/Guardian (please print) _____

Student's Name (please print) _____

Card Holder's Billing Address (please print)

City, State

Zip

(____) _____ (____) _____ (____) _____

Home Number

Work Number

Cell Number

Parent/Guardian's Signature

Date Signed

Cardholder's Signature (if different from parent/guardian)

Date Signed