

RHYTHMIC GYMNASTICS SCHOOL

NEW STUDENT REGISTRATION FORM 2022/2023

Student Information

Student's Name: _____

Date of Birth (MM/DD/YYYY): _____ Age: _____ Grade (fall): _____

Address: _____

Preferred Cell Phone: _____

Phone (2): _____

Preferred Email Address: _____

Mother's Name: _____

Father's Name: _____

PAYMENT:

Zelle: info@hopegymnastics.org

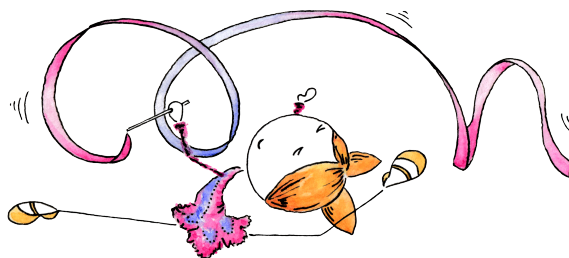
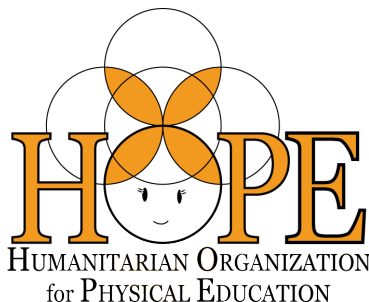


zelle®

All payments (Tuition, competitions, camps) must be done in Zelle or any other direct bank transfer:

info@hopegymnastics.org.

Registration will be only completed when Bank Transaction (Zelle) is confirmed.



Student's Name:

Release of Liability

I hereby certify that my child has no condition that prevents them from fully participating in the Rhythmic Gymnastics & Dance classes offered by H.O.P.E. I assume all risks and release H.O.P.E. from any liability related to any injuries or damages occurring as a result of participation. In the event of a medical emergency in which I cannot be reached, I authorize H.O.P.E. to seek the necessary medical attention for my child.

☐ I have read the above and agree.

Consent for Emergency Medical Treatment

I authorize H.O.P.E. to pursue care or treatment to be rendered in the event of a medical emergency. I agree to be responsible for any and all necessary charges incurred as a result of, and in connection with such emergency care.

☐ I have read the above and agree.

Photo/Video Release

I hereby give permission for my child to be photographed/videotaped during the H.O.P.E. Classes and Events. I understand the photos will be used to keep a journal of activities, to share during power point presentations and/or reports to our donors and for promotional purposes including flyers, brochures, newspaper and on the internet (social media and website) or TV. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all photos are the property of H.O.P.E.

☐ I have read the above and agree.

Class Protocol & Attendance

All students are required to arrive to class on time. Any student who arrives 15 minutes past start time will not be admitted into class. Students must attend class prepared & dressed in leotards (or tight top) & legging (all black), & hair tied back. No big jewelry and / or accessories are allowed. Students are recommended to have Rhythmic Gymnastics half shoes. In the event a student misses class, NO MAKEUPS will be held. In the event H.O.P.E. has to cancel a class, a makeup class will be scheduled.

☐ I have read the above and agree.

Payments and Refund Policy

No refunds or credits will be given for withdrawals or absences once the session begins. Bounced payments will be added a \$30 fee.

Summer camp:

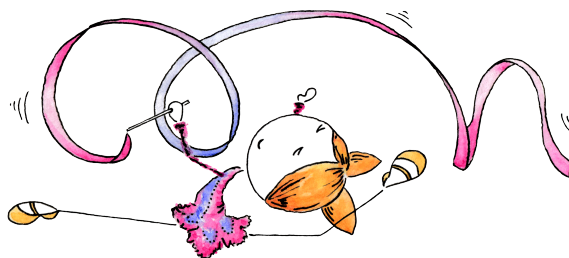
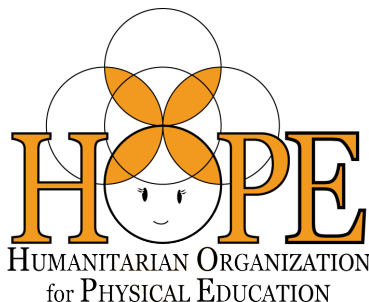
*Minimum number of students per week is 5. Less than 5 gymnast enrolled the will be class is cancelled and full refund is issued.

*There is no refunds and discounts for cancelations done 2 weeks prior the Start of the Training. We just accept cancelations in writing on the email info@hopegymnastics.org

☐ I have read the above and agree.

Concussion Prevention: I certify that I clicked on the link https://www.cdc.gov/headsup/basics/concussion_symptoms.html and learned about Concussion Prevention.

☐ I have read the above and agree.



Student's Name:

I understand that due the health risk associated with exercising wearing masks, H.O.P.E. Team Gymnasts are not mandate to wear it. I certify I am comfortable with my child be around and interact in close proximity with maskless children. I also certify I understand the risks associate with my child presence in a mask free environment, and in a case of any virus (not only limited to COVID-19) outbreak, I assume all liabilities voluntarily and under no duress.

☐ I have read the above and agree.

I certify that my child is healthy, free of injuries, and her certified Physician gave her full approval to join H.O.P.E. Competitive Team and participate in all proposed activities without restrictions. I understand that H.O.P.E. Coaches have knowledge to work only with physically healthy children and are not responsible to rehabilitate any gymnast. Any injured Gymnasts should not participate in any H.O.P.E. training and should first seek professional and proper medical attention. I understand that training can be only modified for minor aches and pains, and coaches must be made aware of any discomfort before practice. Any serious and more persistent injury must be first treated outside practice.

☐ I have read the above and agree.

I understand if my child is sick I will NOT bring her to the gym. If she has fever (100.4F or above) accompanied by cold symptoms, please test her for COVID, even if the symptoms resolve next day. If the test is negative, the child cannot return to practice until she has been fever-free for 24 hrs, without the use of fever-reducing medications. COVID-19 Quarantine protocols: We follow Greenwich Public School District in regard quarantine. Please notify immediately coaching Team that you are testing your child and please do not bring her to practice while waiting COVID-19 test result.

☐ I have read the above and agree.

Release of Liability - Online Classes (Zoom Platform)

I certify that a responsible adult (+18yrs old) will be present monitoring the gymnast and be available for helping her if help is needed during the entire online class duration.

I also assume all risks and release H.O.P.E. and instructors from any liability related to any injuries or damages occurring as a result of the gymnast participation in the on-line class.

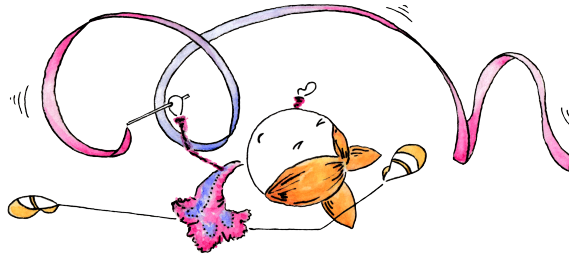
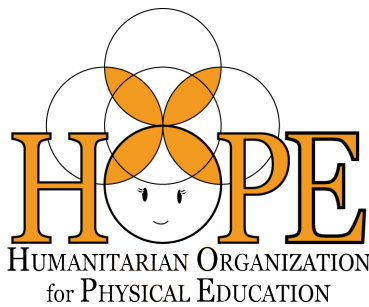
I understand that I am responsible to create a safe environment at home (or the place that the gymnasts is taking the online class) so the gymnasts can take part fully of the online class. I take fully responsibility for injuries that may happen as a result of my child participation in the online classes.

☐ I have read the above and agree.

COVID-19 Liability Waiver

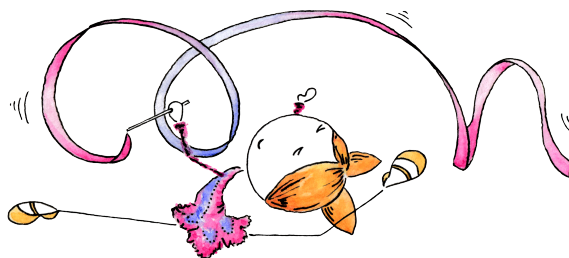
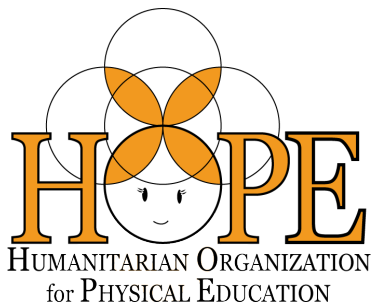
The undersigned individual ("Signatory") is making this liability waiver releasing all past, present, and prospective claims against H.O.P.E. RHYTHMIC GYMNASTICS (Humanitarian Organization for Physical Education ("Business")) as well as its shareholders, officers, directors, members, managers, employees, contractors, agents, successors, insurers, attorneys, assigns, and all affiliates ("Business Parties") and assuming all liabilities relating to the COVID-19 pandemic voluntarily and under no duress. Signatory is over the age of 18, of sound mind, and competent to make this liability waiver.

Assumption of Risk and Release of Liability. Signatory is aware of current information relating to the COVID-19 pandemic and is knowledgeable about and has understood the instructions given by federal and state governmental authorities to shelter-in-place or stay-at-home due to the highly contagious nature of the COVID-19 Coronavirus and potential for illness, respiratory illness, hospitalization and death as a result thereof. Signatory, being aware of such risks, chooses to voluntarily enter the premises of Business and seek goods/services from Business as a patron/



customer. Signatory understands, agrees, and acknowledges, that the risks associated with visiting Business, its premises, and seeking to use and/or purchase Business's goods and/or services, as well as interfacing with Business Parties and/or the Business's staff or other patrons of the Business could expose Signatory to COVID-19 and its symptoms, including but not limited to coughing, fever, runny nose, respiratory symptoms, lung damage, breathing difficulties, damage to extremities, loss of smell or taste, stroke, heart problems, and significant medical issues requiring use of ventilators, artificial breathing devices, breathing tubes, requirement of intensive care, permanent bodily injury, emotional distress, and possibly death. Signatory understands the risks of participating in such activities and voluntarily chooses to patronize Business notwithstanding such risks, and Signatory acknowledges that Signatory has freely consented to such conduct and have assumed the risks thereof. Signatory further understands that Business and Business Parties specifically disclaim and have not made any representations or warranties about other patrons or persons at the premises of the Business or the safety of the premises itself from COVID-19, including any representations or warranties that the COVID-19 particles or droplets are not or will not be present at the premises of the Business, airborne, or on the surfaces of equipment, furniture, fixtures thereupon. Signatory acknowledges that the aforementioned are not an exhaustive list of the risks, hazards and dangers to which Signatory may be exposed as a result of Signatory's presence at the premises of the Business, and Signatory accepts and assumes any and all risks, hazards and dangers regardless of whether they are detailed in this Waiver, and Signatory acknowledges that the waivers, releases and indemnities in this Agreement shall apply to all such risks, hazards and dangers, known or unknown.

Release of All Known and Unknown Claims. TO THE MAXIMUM EXTENT PERMITTED BY LAW, SIGNATORY, ON BEHALF OF SIGNATORY AND SIGNATORY'S HEIRS, NEXT OF KIN, SPOUSES, GUARDIANS, EMPLOYEES, AGENTS, CONTRACTORS, REPRESENTATIVES, EXECUTORS, ADMINISTRATORS, SUCCESSORS, LICENSEES AND ASSIGNS (COLLECTIVELY, THE "RELEASING PARTIES"), SIGNATORY IRREVOCABLY AND UNCONDITIONALLY RELEASE AND FOREVER DISCHARGES THE BUSINESS AND EACH AND EVERY ONE OF THE BUSINESS PARTIES (ALSO REFERRED TO AS THE "RELEASED PARTIES") FROM ANY AND ALL CLAIMS, ACTIONS, COMPLAINTS, DAMAGES, DEMANDS, ALLEGATIONS, SUITS, LIABILITIES, LOSSES, LIENS, COSTS, EXPENSES AND INJURIES OF ANY KIND WHATSOEVER (INCLUDING, WITHOUT LIMITATION, ATTORNEYS' FEES AND COSTS AND EXPERT WITNESS FEES) (COLLECTIVELY, "CLAIMS") DIRECTLY OR INDIRECTLY CAUSED BY, ARISING OUT OF, RESULTING FROM, RELATING TO COVID-19 AND COVID-19 RELATED ILLNESS AND/OR BY REASON OF SIGNATORY'S PARTICIPATION IN OR IN CONNECTION WITH THE BUSINESS DURING THE ENTIRETY OF THE COVID-19 PANDEMIC ON ANY LEGAL OR EQUITABLE THEORY WHATSOEVER (COLLECTIVELY, THE "RELEASED CLAIMS"). THE RELEASED CLAIMS SPECIFICALLY INCLUDE, WITHOUT LIMITATION, CIVIL CLAIMS AS WELL AS ANY AND ALL COMPLAINTS TO AND PROCEEDINGS BEFORE ANY GOVERNMENTAL AGENCY, BODY, INVESTIGATING ENTITY, OR LAW ENFORCEMENT, AND ANY CLAIMS RESULTING FROM THE ACTIONS OF ANOTHER PARTICIPANT OR ANY OTHER THIRD PARTY AT ANY TIME, WHETHER OR NOT CAUSED BY OR ARISING OUT OF THE NEGLIGENCE, GROSS NEGLIGENCE, OR INTENTIONAL MISCONDUCT OF ANY OF THE BUSINESS PARTIES. TO THE MAXIMUM EXTENT PERMITTED BY LAW, SIGNATORY ALSO AGREES NOT TO SUE OR INSTITUTE ANY OTHER LEGAL PROCEEDINGS AGAINST ANY OF THE RELEASED PARTIES BASED ON ANY OF THE RELEASED CLAIMS HEREUNDER. SIGNATORY ACKNOWLEDGES THAT THERE IS A POSSIBILITY THAT AFTER THE EXECUTION OF THIS AGREEMENT, SIGNATORY MAY DISCOVER FACTS OR INCUR OR SUFFER CLAIMS THAT WERE UNKNOWN OR UNSUSPECTED AT THE TIME SIGNATORY EXECUTED THIS AGREEMENT, AND WHICH, IF KNOWN BY SIGNATORY AT THAT TIME, MAY HAVE MATERIALLY AFFECTED SIGNATORY'S DECISION TO EXECUTE THIS AGREEMENT. SIGNATORY ACKNOWLEDGE AND AGREE THAT BY REASON OF THIS AGREEMENT AND THE RELEASES CONTAINED



HEREIN, SIGNATORY HAS ASSUMED ANY RISK OF SUCH UNKNOWN FACTS AND SUCH UNKNOWN AND UNSUSPECTED CLAIMS AND THIS RELEASE SHALL CONSTITUTE A FULL, FINAL, AND COMPLETE RELEASE, ACCORD AND SATISFACTION OF EACH AND EVERY OF THE RELEASED CLAIMS THAT SIGNATORY HAS OR MAY HAVE, AT ANY TIME, AGAINST ANY OF THE RELEASED PARTIES. TO THE MAXIMUM EXTENT PERMITTED BY LAW, SIGNATORY KNOWINGLY AND VOLUNTARILY WAIVES THE PROVISIONS OF ANY STATUTE, LAW OR RULE OF SIMILAR EFFECT WITH RESPECT TO ANY SUCH UNKNOWN FACTS AND SUCH UNKNOWN AND UNSUSPECTED CLAIMS OF ANY OTHER JURISDICTION THROUGHOUT THE WORLD, AND ACKNOWLEDGES AND AGREES THAT THIS WAIVER IS AN ESSENTIAL AND MATERIAL TERM OF THIS RELEASE. SIGNATORY REPRESENTS THAT SIGNATORY UNDERSTANDS AND ACKNOWLEDGES THE SIGNIFICANCE AND CONSEQUENCE OF THE RELEASES MADE HEREIN, AND OF SIGNATORY'S WAIVER OF ALL RIGHTS UNDER ANY SIMILAR STATUTES, LAWS AND RULES. In making this Agreement, Signatory acknowledges that they have reviewed, and that they are familiar with, Civil Code Section 1542 and any other similar state statute, which provides as follows:

"A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her, must have materially affected his OR HER settlement with the debtor."

Being aware of said code section and except as set forth otherwise in this Agreement, Signatory expressly waives and relinquish all rights and benefits which each may have, or may have had, under Section 1542, or under any other comparable statute or common law principles of similar effect of any other jurisdiction, to the full extent that each may lawfully waive all of such rights and benefits which pertain to the matters released herein.

Indemnity. Signatory agrees to defend, indemnify and hold the Business as well as each of the Business Parties free and harmless from and against any and all Claims (including, without limitation, attorneys' fees and costs and expert witness fees) caused by, arising out of, resulting from, or relating to, Signatory's presence upon the premises of the Business, participation with Business and/or acquisition of goods/services from Business.

 I have read the above and agree.

I have read and fully understand this Release. I certify that I am the parent or legal guardian of the Participant. On behalf of "Participant" who is a minor, I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless the Released Parties from any and claims, demands, or causes of action, arising out of injury, disability, death or other loss or damage to person or property, whether related to activities described above or not, including any such claims relating to COVID-19 and/or which allege negligent acts or omissions of the Released Parties to participate in activities offered by H.O.P.E. Rhythmic Gymnastics. I further agree to indemnify and hold harmless the Released Parties from any and all claims which are brought by, on behalf of Participant, and which are in any way connect with such participation of activities thereon by Participant.

I expressly agree that the foregoing Release is intended to be as broad and inclusive as is permitted by the laws of the State of Connecticut and New York and that if any portion thereof is held invalid it is agreed that the balance shall notwithstanding, continue in full legal force and effect.

Signature of Parent/ Guardian: _____ Date: _____

Print Name _____