



BeachLIFE Fitness Children's Tumbling, Dance & Fitness Registration Form

Name: _____ AGE: _____ Grade: _____

Experience in Class _____ Day(s) Attending: _____ Time: _____

Parent/Guardian: _____ Home Phone: _____ Cell: _____

2nd Parent/ Guardian: _____ Home Phone: _____ Cell: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Emergency Contact: _____ Home Phone: _____ Cell: _____

Medical Conditions / Allergies: _____ Health Insurance Company: _____

Primary Doctor: _____ Phone: _____ Hospital Preference: _____

Release: In consideration of BeachLIFE Fitness LLC accepting my child into participation and training in gymnastics, tumbling, dance and fitness, which activities I hereby acknowledge involve greater than normal risks of injury, I agree as may child's parent/guardian to assume all risk, cost or loss sustained by me, my child or my family in connection with participation. I/WE understand that gymnastics, tumbling, dance and fitness classes that are unique in that they involve motion, rotation and height that carry with them the risk of injury.

Warning: Catastrophic injury, paralysis, concussion (see attached concussion information and waiver as well) or even death can result from improper conduct of gymnastics, tumbling, dance and fitness activities. I give permission to BeachLIFE Fitness LLC and/or appropriate medical facility to take whatever emergency action (ie First Aid, CPR, etc) measures are judged necessary for the care and protection of my child while under supervision of BeachLIFE Fitness LLC staff. In case of a medical emergency, I understand that my child will be transported to an appropriate medical facility by local EMS for treatment if deemed necessary. The child will be transported at my (parent/guardian) expense. It is also understood that in some medical situations the coaching staff will need to contact the local emergency resources before the parent/guardian, child's physician an or other adult acting on the parent's behalf can be contacted. Further, I hereby release and agree to hold harmless and indemnify BeachLIFE Fitness LLC and/or Jennifer Jens, its employees and volunteers from any claims, losses or expenses incurred by or on behalf of me, my child or my child's family.

Parent / Guardian: _____ **Date:** _____