

MEGA Fun and Fitness/Michigan Elite Gymnastics Academy (MEGA) Registration
Must return this form to MEGA Business Office prior to participation

STEP 1 Family Information/Parent/Guardian/Billing Contact

First Name _____ Last Name _____
Address(street) _____ (city) _____ (state) _____ (zip) _____
Home Phone _____ Cell Phone _____ Other _____
E-mail (we will not share this---for in-house purpose only) _____
How did you hear of us? Friend: _____ Magazine Ad: _____ Social Media: _____
School Flyer: _____ Field Trip: _____ Internet: _____ Other: _____

STEP 2 Participant Information

_____ registered or added names online

1. Name _____ Sex _____ Age _____ Birthday _____
2. Name _____ Sex _____ Age _____ Birthday _____
3. Name _____ Sex _____ Age _____ Birthday _____

I understand and give permission that my child(s)/(ren's) picture may be used for promotional purposes. _____ (initials)

Step 3 Emergency Information and Permission to Provide Assistance

Emergency Contact (other than parent) _____ Telephone _____
Does the student have any medical conditions or are taking any prescriptions to which we should be alerted? YES NO
If yes, please explain: _____

I have completed the required concussion waiver as required by the state of Michigan. _____ (initials)

I understand that it is the express intent of MEGA Fun and Fitness (all such entities hereafter collectively referred to as "MEGA") to provide for the safety and protection of myself and my child(ren). I further understand that safe, professional gymnastics and instruction in other MEGA Programs often includes hands-on spotting to my child. _____ (initials)

I understand that the owners, employees, coaches, agents, teachers, instructors and volunteers of MEGA, or other adjunct programs or events ("MEGA Personnel") are not physicians or medical practitioners of any kind. Nevertheless, I hereby agree that MEGA Personnel may render first aid to the students listed above in the event of any injury or illness, and if deemed necessary by MEGA Staff, to call a physician, emergency services, and to seek medical help, including transportation by MEGA Personnel to any health care facility or hospital. _____ (initials)

STEP 4 Acknowledgment and Assumption of Risk and Waiver of Liability

I, _____ represent I am the legal guardian of _____ ("Participant") and hereby consent to all Participant's (including myself/and or spouse/nanny/guardian/grandparents, and/or any adult out on the gym floor) participation in all programs of MEGA, or other programs or events conducted in association with MEGA ("Programs"). I recognize that participation in any or all of the Programs will include a variety of activities including without limitation dance, gymnastics, tumbling, trampoline activities, fitness, and/or martial arts, and other activities that such inherently have a significant risks of injury as a result of many factors including but not limited to use of equipment, exposure to heights, lights, loud music, fast motions, being inverted, or coming into contact with hard or stationary structures. Furthermore, these risks exist even if all due care is taken, or due to features of the premises on which the Programs are conducted. I understand that severe injuries and illnesses could result from the Participant's participation in one or more of the Programs, and that such illnesses and injuries may include contagious disease, paralysis, permanent serious injuries or disfigurement, or death. I also recognize that efforts to provide first aid or other assistance to Participant may result in unintended increased injury to Participant. Although the risk of participation in the Programs cannot ever be eliminated, I agree to advise the Participant of the aforementioned risks, and to encourage the Participant to follow any safety rules and the instructors'/coaches' instructions. I represent and warrant that there is now in place, and there will continue to be during all times that Participant is participating in the Programs, proper hospitalization, health, and accident insurance coverage, which I consider adequate for Participant in light of their participation in the Programs. With knowledge of the aforementioned risks, on behalf of Participant and myself, and all other persons with the ability to make a claim through or on behalf of the Participant, I hereby assume the risks of Participant's participation in the Programs, and hereby release MEGA, its owners, officers, employees, coaches, agents, teachers, instructors, and volunteers (the "MEGA Personnel") from all claims and/or liability for damages and/or injuries and/or illnesses and/or diseases of any kind or nature suffered by Participant on account of the Participant's participation in the Programs. I understand that MEGA is relying on the representations made herein, as well as this assumption of risk and release of liability, in agreeing to allow participants to participate in the Programs. Accordingly, I agree to indemnify and hold the MEGA Personnel harmless with respect to any claims made against the MEGA Personnel by or on behalf of the Participant arising out of Participant's participation in the Programs. **THIS FORM INVOLVES SUBSTANTIAL LEGAL RIGHTS. BY SIGNING BELOW, YOU REPRESENT YOU HAVE READ AND FULLY UNDERSTAND THE CONTENTS OF THIS FORM AND AGREE TO BE BOUND THEREBY.**

MEGA Employees shall have the right to refuse service to, and expel from its property, any person who engages in disruptive, intimidating, or violent behavior; theft; property damage; or other conduct perceived by management to be dangerous or disorderly to MEGA, its employees or its customers. **No refunds will be given.** _____ (initials)

X _____
Parent or Legal Guardian Signature

Date

MEGA Fun and Fitness/Michigan Elite Gymnastics Academy (MEGA) Registration

Tuition and Billing

Tuition and Payment Information: MEGA Fun and Fitness/Michigan Elite Gymnastics Academy, all referred to as "MEGA" does not issue refunds. All sales are final for any product and/or service purchased and/or provided by MEGA. Tuition is based on a 28 day month. If I should receive five classes during the month instead of four there will be no extra charge although it will be considered a makeup for classes missed while we are closed, as determined by MEGA management. I am responsible to make timely payments of my balances due on my MEGA account. From the date of registration forward my entire account balance shall be due on or before the 1st of each month. I understand this only applies to programs that have installment monthly tuition. Fees for other products and/or services shall be paid for at the time of purchase and/or registration (unless given the option to wait until the 1st of the next month). If my payment is not received on or before the due date, MEGA will initiate electronic payments for any balances due on my account PLUS an administrative late fee of \$25.00. All members must have a credit card on file. All information is kept confidential. Payments will be processed with the payment method/information I have chosen on the registration form that is kept on-file with MEGA. If provided, an e-mail notification will be sent any time a payment is processed. I acknowledge that this authorization will remain in effect until I notify the MEGA Business Office in writing 30 days prior to departure that the authorization should be terminated. If for any reason, payments cannot be processed and my account balance remains overdue, I understand that my enrollment in classes will be cancelled. I will be responsible for all costs incurred for collection of any delinquent payments, including but not limited to collection/attorney fees/court costs. I understand that monthly payment amounts may vary as classes are added or dropped and as other charges/payments are applied to my account. A \$25.00 late/insufficient funds fee will be charged for all unpaid accounts monthly. New and updated billing, address and telephone information is the responsibility of the member, and is NOT the responsibility of MEGA to notify the member of expired/declined credit cards and EFT returns. All overdue accounts, including cancelled accounts, will be charged a \$25.00 late fee each month until the account is paid in full or arrangements are made for payment. All currently enrolled students will be automatically charged an annual registration fee of \$40 (one child) or \$52 (family), or the current competitive registration fee (competitive team member) that will be posted to my account on the 1st of the month of my registration anniversary. Competitive team members have an annual team registration fee of \$80, charged when you join the team, and then August 1st annually. MEGA reserves the right to modify the terms of this agreement.

_____ (initials)

Automatic billing: My credit card on file will be charged on the 1st of each month for my balance due. Auto billing applies to MEGA Programs that have a recurring monthly tuition. Fees for other products and/or services may be paid for at the time of purchase and/or registration. I understand if the above-named persons and/or participants are enrolled in a program that has recurring monthly tuition, I am continuously enrolled in the program and I will incur recurring monthly tuition charges on my account until I submit a MEGA class drop request. I understand that it is my responsibility to know my account balance and to pay on time, and not the responsibility of MEGA to send a reminder. _____ (initials)

I have supplied the appropriate billing information to the MEGA office. _____ (initials)

THIRTY (30) DAY DROP POLICY

MEGA has a 30-day written notice drop policy. You must fill out a drop form, which can be obtained at the front desk. You must fill the form out completely. The drop notice will not be processed unless completed, signed and dated. You will be responsible for remaining balances, including the 30 days of tuition and any other balances that are incurred during the 30-day drop period. (for example, if you fill out a drop request form on the 8th of the month (i.e. July), and the form is complete, you will be responsible for tuition and balances due until the 8th of the next month (i.e. August). Team members will be responsible for all fees due for the competition season (tuition, assessments, apparel, camps, etc). Your remaining balance must be paid in full when you submit your drop notice. _____ (initials)

Make Up Classes

Contingent on availability MEGA will provide a make up class for a missed class. Make up classes are offered for only those students who are currently enrolled and paid and cannot be transferred. _____ (initials)

I hereby have read the above information and understand the contents.

X _____
Parent or Legal Guardian Signature

Date

FORM MUST BE COMPLETED AND TURNED IN TO THE MEGA OFFICE PRIOR TO THE START OF ANY PROGRAMS