

Summer Camp 2026

REGISTRATION AND RELEASE FORM

Please read and fill out this form completely (print all information) - ***Required Fields**

*Child's Name _____ *M or F Age _____ *Birth date _____

*Address _____ City _____ State _____ Zip _____

*Parent/Guardian Name: _____ *Cell: _____ *Email: _____

Parent/Guardian Name: _____ Cell: _____ Email: _____

Emergency Contact (other than parent): _____ Home Phone: _____ Cell: _____

Activity/Camp Name _____ Date & Time of Activity/Camp _____

Current Member? Yes No Amount Paid _____ Credit Card/Check #/Cash _____

NOTE: Payment in full must be received to reserve child's space in any activity/camp.

CHECK ANY OF THE FOLLOWING THAT APPLY TO YOUR CHILD

Heart condition _____ High Blood Pressure _____ Headaches _____ Asthma/Breathing Disorder _____ Back/Joint problems _____ Diabetes _____ Allergies _____
Broken Bones _____ Other Condition (including but not limited to autism, sensory issues, etc.) that may interfere with class participation _____

Explain any condition checked (including any food allergies): _____

Does your child carry any emergency treatments, such as asthma inhalers, emergency epi-pens, etc.? If so, list and describe usage.

Does your child wear glasses or contacts? Yes No Will he/she be wearing them during class? Yes No

By the very nature of the activity, gymnastics and dance carry a risk of physical injury. No matter how careful the students and instructors are and no matter what height of landing surface exists, the risk of injury cannot be eliminated. The risk of injury includes minor injuries such as bruises and more serious injuries such as broken bones, dislocations and muscle pulls.

URAWINNER, INC. is not responsible for providing medical accidental insurance. Parents are advised to provide adequate coverage for their child while enrolled in this activity.

In case of an emergency involving your child, it is the policy of URAWINNER, Inc. to render first aid treatment while contacting the parents for further instructions. Only after reasonable efforts to reach the parents without success will we call a doctor, and only in extreme cases will your child be taken to a hospital.

URAWINNER, Inc. cannot be held responsible for any child who waits in the hallway or outside for their ride. We would like for you to require your child to wait in the reception area until you arrive and come in to get him/her.

Media Release

I grant permission for my child to be filmed, videotaped, audiotaped, or photographed by any means used and grant full use of such likeness, voice, or words to be used without compensation. **(*Parent / Guardian's Initials)** _____

RELEASE OF INDEMNITY AGREEMENT

Whereas, (I) the undersigned _____ have requested that my son/daughter, namely, _____ participate in gymnastics and other activities connected with URAWINNER, Inc., and whereas it is in my interest to exchange for the efforts of the teacher, supervisor, or any persons engaged and who will be engaged in the said activities of gymnastics, dance, or martial arts classes, my promise and agreement to release, hold harmless and otherwise indemnify said persons for any demand of claim arising from or in conjunction with this activity. This includes the center, or directly around the center, or in other places so designated URAWINNER, Inc. as the class, performances, parades, Kids Night Out, Lunch Bunch, and any other activity.

NOW, THEREFORE, IT IS AGREED BY THE UNDERSIGNED:

For and in conjunctions with and in consideration of the aforesaid efforts and undertaken (I)/(MY) heirs and assigns have and may have, against any or all of the teachers, supervisors, or other persons engaged in the activities of gymnastics, dance, or martial arts class. And, (I) do further indemnify and agree to hold harmless said, URAWINNER, Inc. and any other persons arising from, therefore, or through, or in conjunction with the activities.

I understand that a child may suffer possible severe injuries, paralysis, or death as a result of participation in gymnastics or dance. With full knowledge of this fact and possible occurrence, I give my consent for my child to participate in the activity at URAWINNER, Inc.

*

Parent or Guardian Signature

Date