



**REGISTRATION FORM**  
 2450 E. Germann, #5 #17  
 Chandler, AZ 85286  
 www.azdynamics.com

For Office Use Only  
 Date of Reg: \_\_\_\_\_  
 Date Entered/by: \_\_\_\_\_  
 Program: \_\_\_\_\_

**Parent/Guardian/Billing Contact:**

Parent/Guardian Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Mom's Cell Phone#: \_\_\_\_\_ Dad's Cell Phone# \_\_\_\_\_ Work Phone# \_\_\_\_\_  
 E-Mail: \_\_\_\_\_ How did you Hear about us? \_\_\_\_\_  
 Emergency Contact Name: \_\_\_\_\_ Phone # \_\_\_\_\_

**Student Information:**

1<sup>st</sup> Student Name: \_\_\_\_\_ Birthday: \_\_\_\_\_  
 2<sup>nd</sup> Student Name: \_\_\_\_\_ Birthday: \_\_\_\_\_  
 3<sup>rd</sup> Student Name: \_\_\_\_\_ Birthday: \_\_\_\_\_  
 4<sup>th</sup> Student Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Special Medical Conditions/Allergies/Restrictions: \_\_\_\_\_

**Arizona Dynamics Gymnastics, LLC has made me aware of the following policies:**

1. Tuition is due between the 20<sup>th</sup>-30<sup>th</sup> of each month. Tuition is based on an annual calendar.
2. On the 1<sup>st</sup> of each month all unpaid tuition accounts will be withdrawn and space will be open for new enrollments. A \$10 re-enrollment will be enforced for continuing students.
3. Auto-pay will run on the 20<sup>th</sup> of every month. To withdraw from auto-pay , you must give written notification on or before the 15<sup>th</sup> of the month.
4. Unlimited make-ups are allowed to ENROLLED students only, and are good for up to 60 days after the absence occurs.
5. I am aware that Refunds or Credits for missed classes , or withdrawing prior to the conclusion of a session, is not allowed for any reason.
6. I am aware that Arizona Dynamics does not guarantee a specific coach for every class, but guarantees a qualified coach for each class.

I have read, understand and agree to the policies stated above.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Assumption of Risk, Waiver of Liability:** In consideration of participating in the Arizona Dynamics Gymnastics & Cheer & Ninja Zone I represent that I understand the nature of this activity and that I am qualified, in good health and in proper physical condition to participate in such activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. I fully understand that this activity involves risks of bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or in actions of those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releases" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the activity. I hereby release, discharge, and covenant not to sue Arizona Dynamics, Ninja Zone its respective administrators, directors, agents, officers, volunteers, and employees, other participants any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk, I or anyone on my behalf, makes a claim against any Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage or cost, which any may incur as the result of such claim.

I have read the Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement, understand that I have given up substantial rights by signing it and have signed freely and without inducement.

Media Waiver: I also understand and give permission for photographs and videos of names persons and/or participants and/or myself be used in print, social or broadcast media as deemed appropriate for the promotion of Arizona Dynamics Gymnastics & Cheer Center and Ninja Zone.

\_\_\_\_\_  
 Parent or Guardian Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed Student Name



**AUTO-PAY CREDIT CARD FORM**

STUDENT NAME: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

BILLING ADDRESS OF CARD: \_\_\_\_\_

CARD TYPE: \_\_\_\_\_ CARD NUMBER: \_\_\_\_\_

CARD EXPIRATION: \_\_\_\_\_ CARD SECURITY CODE: \_\_\_\_\_

**\*For your safety this form is shredded after information is securely entered into our computer program system.**