



Registration

PLEASE READ AND INITIAL: Our fees are based on monthly sessions and are due on the 25th of the previous month. A late fee of \$10 applies if payment is received after the 5th of every month. If payment is not received by the 10th of the month, the student may no longer participate in the class and is considered withdrawn. _____ (initial). I understand that I am not able to receive a refund of my tuition or my registration fee if I withdraw the student ____ (initial). I understand that any classes missed for any reason can neither be made up nor can any fees be pro-rated _____ (initial). Vacations, sick days, or other commitments which cause the student to miss some or most of the monthly session, will still require the full monthly fee ____ (initial). The "Waiver of Liability and Imagery Release" section must be signed in order the student to attend class. ____ (initial). I agree to abide by the policies of TBR. _____ (initial). Fees are based on a calendar year- holidays are already factored in.

Annual Registration Fee- \$50

STUDENT INFORMATION

Name: _____ Age: _____ Birth Date: _____

Parents Name: _____ (circle) Mother Father Guardian

Address: _____

City/State/Zip: _____

Contact Information: Home phone _____

Cell phone (mom): _____ Cell phone (dad): _____

Work phone: _____ E-mail _____

Class: _____ Day: _____ Time: _____

Medical Information (allergies, chronic pain, etc.):

How did you hear about us? _____

Do you want your invoices printed? _____

For office use:

Date Registered: _____

Form of payment: _____

Amount paid: _____ /ck-receipt # _____

Start Date: _____ Class Day/Time: _____



6542 Krycul Ave. Riverview, FL 33569
(813) 741-2TBR (2827)

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND
INDEMNITY AGREEMENT ("AGREEMENT") (complete if participant is an adult)**

In consideration of participating in the Tampa Bay Rhythmics and Dance, I present that I understand the nature of the 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 my participation in the activity. I fully understand that this activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the participant 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, costs, and damages I incur as a result of my participation in the activity. I hereby release, discharge, and covenant not to sue Tampa Bay Rhythmics and Dance, its respective 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 "RELEASEES" 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 of the "RELEASEES", I will indemnify, save, and hold harmless each of the "RELEASEES" from any loss, liability, damage, nor 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 it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Printed name of participant

Date

PARENTAL CONSENT (Complete if participant is a minor)

I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the Minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, and covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releases from the litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Printed name of Parent and/or Legal Guardian

Date

Signature of Parent and/or Legal Guardian



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IMAGERY RELEASE AND PHOTOGRAPHY/VIDEO POLICY AGREEMENT

I hereby give permission for Tampa Bay Rhythmics and Dance, LLC or associations to photograph or videotape my child participating in rhythmic gymnastics or any other activity associated with Tampa Bay Rhythmics and Dance, LLC. I understand that any images may be used for advertising or promotional purposes or for display at Tampa Bay Rhythmics and Dance, LLC or any other purpose.

Tampa Bay Rhythmics and Dance permits parents/legal guardians and spectators to take photographs and videos during practices and at events, with the prior approval from the coaches. Parents/legal guardians and spectators should only take photographs and videos of their own children, unless they have the express approval of the parents of other children and TBR.

No photos/videos taken of TBR coaches and other gymnasts are to be uploaded to social media sites without the written permission from the coaches and parents/legal guardians of any gymnasts shown in the photo/video. Please provide TBR with a courtesy copy of the written permission.

Printed name of Parent and/or Legal Guardian

Date:

Signature of Parent and/or Legal Guardian

PRIVATE LESSONS AGREEMENT

Tampa Bay Rhythmics' policy on private lesson cancellations states that at least 24 hours' notice must be given when cancelling or you may be billed for your full missed lesson. We understand that circumstances arise that do not allow for 24 hours, and if that happens, special consideration will be given regarding billing, on a case-by-case basis.

Printed name of Parent and/or Legal Guardian

Date:

Signature of Parent and/or Legal Guardian