



# Beginner, Intermediate & Advanced Classes (Age: 10+ yrs) Summer Session [June 3 - Aug 3] Registration Form



Parental Consent: I, parent or guardian of \_\_\_\_\_, hereby give approval for his or her participation in the Trussville Gymnastics Program at the Trussville Parks and Recreation Department Athletic Center. I assume all risks and hazards incidental to such participating in the Trussville Gymnastics Program. I fully understand that the nature of gymnastics involves jumping, twisting, flipping, landing, etc. Precautions are in place at the gymnasium to protect my child from injury but accidents, however rare, are possible. I hereby certify that my child is fully capable of participating in gymnastics and that my child is healthy with no physical or mental disabilities that would restrict full participation in the activities of the gymnastics program. In addition to giving my full consent for my child's participation, I do hereby waive, release, absolve, and indemnify and agree to hold harmless the City of Trussville, Trussville Parks and Recreation Department, the Park Board, it's Directors, Officers, Members, Staff, Supervisors, Trussville Gymnastics, Coaches, and Officials for any claim arising out of injury to the child, except to the extent and in the amount covered by the accident and/or liability insurance. I understand that Trussville Gymnastics and the City of Trussville will not be liable in any way for medical, doctor, hospital, or dental expenses. It is my specific understanding by signing this document that all parents and guardians of my child will be giving up the right to all claims, suits, causes of actions, demands, monies, attorney fees and judgments.

I give my permission to the Trussville Gymnastics staff, or a staff member of the Trussville Parks and Recreation to authorize any emergency medical treatment that my child/ward may require during the Gymnastics Session.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Periodically the Parks and Recreation Department & Trussville Gymnastics will use pictures of participants on the web page or other forms of advertising. Please sign below if you don't have an issue with us using these photographs.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_  
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**For Office Use Only**  
Payment Method: Cash \_\_\_ Credit Card \_\_\_ Check \_\_\_ Staff Member? \_\_\_

Check Number \_\_\_\_\_ Credit Card/Cash Receipt # \_\_\_\_\_

**NO CLASSES THE FOLLOWING DATES:**  
July 4 [Independence Day]

**MAKE-UP CLASSES  
WILL BE SCHEDULED:**  
[TBD]

601 Parkway Drive, Trussville AL 35173  
205.492.3898  
www.trussvillegymnastics.com

# Recreational Class Descriptions

# Class Info



The **BEGINNER** class involves the development of basic skills for vaulting, uneven bars, balance beam, and floor work as well as an introduction to basic stretching and conditioning. Gymnasts who are new to gymnastics or have aged out of the Pink or Red team should sign up for this class.



**Ages:** 10+  
**Class Length / Frequency:** 1 hour, Once per week  
**Session Dates:** June 3 - August 3, 2019  
**Days and Times:** Sat 10:00-11:00 am  
**Fee Structure:** \$10 registration, \$135 per session  
**Coach to Gymnast Ratio:** 1:8



Gymnasts who have passed the Beginner class should enroll in the **INTERMEDIATE** class. There will be more emphasis on teaching the correct technique of skills learned in the Beginner class. Students are expected to do more conditioning at practice and at home.



**Ages:** 10+  
**Class Length / Frequency:** 1 hour, Once per week  
**Session Dates:** June 3 - August 3, 2019  
**Days and Times:** Wed 5:30-6:30pm  
**Fee Structure:** \$10 registration, \$135 per session  
**Coach to Gymnast Ratio:** 1:8



After completing and passing the Intermediate class, gymnasts can enroll in the **ADVANCED** class. Students will progress in their tumbling abilities. Skills learned on the other apparatus will be similar to requirements in Level 2 and 3 USA Gymnastics compulsory routines.



**Ages:** 10+  
**Class Length / Frequency:** 1.5 hours, Once per week  
**Sessions Offered:** June 3 - August 3, 2019  
**Days and Times:** Tues 4:00-5:30 pm  
**Fee Structure:** \$10 registration, \$150 per session  
**Coach to Gymnast Ratio:** 1:8

## GYM POLICIES

- Parents are responsible for their children **BEFORE** and **AFTER** class. No child should be left unattended. Please be in the gym 5 minutes before class is over.
- We reserve the right to cancel classes without a minimum of 3 students. If we do, we will refund your tuition or let you switch to an open class.
- In order to secure a spot in a class, we must receive a completed registration form, signed waiver, tuition payment, and non-refundable annual registration fee. Once the session has begun, no refunds or credits will be issued.
- Gymnasts must wear leotards (boys shorts and tee-shirts) and hair must be pulled back into a ponytail. No jewelry, shoes or socks.

## \*PLEASE FILL OUT INFORMATION BELOW\*

Child: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B \_\_\_\_\_  
 Mom: \_\_\_\_\_ Mom cell: \_\_\_\_\_  
 Dad: \_\_\_\_\_ Dad cell: \_\_\_\_\_  
 Parent Email: \_\_\_\_\_ DL #: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Special Needs /Allergies: \_\_\_\_\_  
 Class Level (circle):      Beginner      Intermediate      Advanced  
 Class Day: \_\_\_\_\_ Class Time: \_\_\_\_\_

\_\_\_\_ I have read and fully understand all of the information listed in this registration including the right to cancel class, late fees and no refunds once session has started.

PARENT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_