



# Owego Gymnastics and Activity Center



## Dance Classes Registration Form September 2022 – August 2023

You must have completed this **NEW registration form** to participate in classes at Owego Gymnastics and Activity Center (YOU MUST SIGN THE WAIVER)..

**Registration fee of \$40 single \$60 family in county. \$45 single \$65 family out county must be paid to be registered.**

**MAIL TO: Owego Gymnastics & Activity Center 748 State Route 38 Owego, NY 13827 or Email: [owegogymnastics@gmail.com](mailto:owegogymnastics@gmail.com)**

**Buttercups** (3 Years & up) **Sunflowers** (5 Years & up) **Roses** (8 Years & up) **Other** (Miss Bekki will let you know which level)

NAME OF STUDENT(s): (You may use one registration for more than one class or child, please fill out below)

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ GENDER: MALE FEMALE CLASS \_\_\_\_\_ DAY \_\_\_\_\_ TIME \_\_\_\_\_

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ GENDER: MALE FEMALE CLASS \_\_\_\_\_ DAY \_\_\_\_\_ TIME \_\_\_\_\_

CHILD'S MAILING ADDRESS \_\_\_\_\_ PRIMARY PHONE: ( ) \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

GUARDIAN 1 NAME: \_\_\_\_\_ GUARDIAN'S PRIMARY PHONE: ( ) \_\_\_\_\_

GUARDIAN'S PLACE OF EMPLOYEMENT \_\_\_\_\_

GUARDIAN 2 NAME: \_\_\_\_\_ GUARDIAN'S PRIMARY PHONE: ( ) \_\_\_\_\_

GUARDIAN'S PLACE OF EMPLOYEMENT \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

*(If email supplied, and kept updated, we will send information on the Center via email)*

**In case of emergency, please contact: (This should be someone other than parents.)**

NAME: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

**Does your child(ren) have any medical or physical conditions, restrictions, or allergies that we should be aware of?  
YES or NO (if yes please explain on back)**

I would like to help with  Board Member  Maintenance/Cleaning/Gardening  Fundraisers  Serve on Committee

### RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT INCLUDING COVID-19

I, \_\_\_\_\_, parent /guardian of \_\_\_\_\_, hereby give permission for said son/daughter to participate in classes at Owego Gymnastics and Activity Center. I understand that dance involves movement of the body; therefore there are inherent risks involved. I hereby testify as to my son's/daughter's qualified, in good health, and in proper physical condition to participate and I authorize the Owego Gymnastics and Activity Center to seek Medical Treatment at the nearest Medical Facility in case of emergency.

An inherent risk of exposure to Infectious diseases (example COVID-19) exists in any public place where people are present. By entering Owego Gymnastics & Activity Center, you voluntarily assume all risks related to exposure to an infectious disease

I am aware that while dance involves incidental contact with other children and staff. OGAC programs are operating in a social and physical distancing environment but even with best efforts and intentions there will be times when the children will breach the prescribed (currently 6') distancing recommendation. In addition, our staff will physically assist/spot when they believe that this would improve safety, and will also provide assistance in the event of an injury. I understand and agree that physical assistance/spotting will be a part of the process at OGAC and I agree to permit the OGAC staff to physically assist my child whenever they believe this assistance is needed.

I agree and understand that all activities are done at the participant's own risk, without liability to this Center, its officers or instructors and have read and agree to follow the Parent/Guardian Responsibilities. I intend this statement to take effect as a sealed instrument.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Form Media Recording** I grant permission to Owego Gymnastics and Activity Center to use the image of my child, \_\_\_\_\_, in materials that include, but may not be limited, to brochures and newsletters including streaming of classes. **Yes/No (Absence of signature or circled yes/no is acceptance of release)**

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_