

Jennie's Chesapeake Gymnastics Club, LLC
J.C.G.C.
871 Keith Lane Unit 2
Owings, Maryland 20736
410-286-2646

How did you find out about our program? _____

Please select a program:

Gymnastics Cheer Tumbling Cheerleading

Start date _____ Class Code _____

Class Description _____ Class Time _____

Student's Full Name _____

Student's Date of Birth & Age _____

Parent/Guardian Full Name _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Work Phone _____ E-mail address _____

Emergency Contact Name _____

Emergency Contact Number _____

Does your child have a medical or other condition that would affect his/her participation in gymnastic activities?

No Yes if "yes", please explain:

I have received and read JCGC rules and policies with regard to the program(s) that I have indicated on this registration form. I understand that violation of the club regulations may result in the dismissal of me/my child (children) from the program and facility. I take full responsibility for all payment of expenses and legal fees. If I fail to make payments to JCGC regarding my child/children programs, the staff of JCGC has the right to not allow me/my child (children) to participate in any of the programs or competitions.

MEDICAL AGREEMENT AND MEDICAL RELEASE

All precautions will be taken to prevent accidents. Simple first aid will be provided to all minor injuries. Parents/Guardian/Spouse will be contacted when necessary. I hereby release all rights and claims for damages that I have at any time against JCGC and its representatives, whether paid or volunteer, for any injuries or damages in connection with the gymnastics program or other activities related to JCGC. The risks involved in respect to such programs are fully understood and have been explained to me and my child (children). I hereby give permission for me/my child/children to be taken to a nearby hospital to be treated (including x-rays) in case I cannot be reached in an emergency.

Parent/Guardian Signature: _____ Date: _____

Printed Name: _____

****Please make checks payable to Jennie's Chesapeake Gymnastics Club, LLC (JCGC) and include your child's name on your payment.**

Fees: Registration Fee \$25.00 per child
Class Fee: \$15.00 per hour
\$12.00 for 45 min
\$10.00 for ½ hr.

PAID MONTHLY in the beginning of the month