## **Stars & Stripes Athletics Registration Form:** Return to the Stars & Stripes Business Office BEFORE participation can begin.

Step 1: Family Information / Parent / Guardian / Billing Contact:				
Parent/Guardian First Name:	Last Name:			
Address:		City:		State: Zip:
Mom Phone: Dad Phone:	:			Home Phone:
E-mail: How did you hear about us?				
(username for online portal)				
Emergency Contact:	Relatio	nship to	Participa	ant: Phone:
Step 2: Participant Information				
1 <sup>st</sup> Participant Name:	DOB:	/	_/	Medical Conditions/Allergies:
2 <sup>nd</sup> Participant Name:	DOB:	/	/	Medical Conditions/Allergies:
3 <sup>rd</sup> Participant Name:	DOB:	/	/	Medical Conditions/Allergies:
family fun nights, parents night out, trampoline, dance, karate, circuit training, running, free weights, condit persons participating in any and all programs at Stars & Stripes Athletics and I ACCEPT ALL RISKS associated i respective heirs, administrators, executors, and successors, hereby COVENANT NOT TO SUE and FOREVER RI and all damages or injuries suffered by myself or my child while under the instruction, supervision or contro	essons, birthday p ioning, obstacle co with that participa ELEASE Stars & Stri I of Stars & Stripes to what the guardia	arties, birthday burses, persona tion. In conside ipes Athletics, i Athletics. I also an feels is appr	r party guests, I training, grou eration for allo its officers, dire o understand to opriate. Stars	s, bring a friend, play time, field trips, Special Olympics, swimming, competitions, preschool, group activities, oup fitness and athletic training. Beling fully aware of these dangers, I voluntarily consent to the aforementioned llowing my child and/or myself to use this facility, I, on my own behalf and the behalf of my child and our lirectors, shareholders, employees or other representatives, whether paid or volunteer, from all liability for any d that it is the responsibility of the legal guardian and/or the above named persons to warn the participant s & Stripes Athletics will only warn the participant thru safety messages and our teaching style and progressions.
PERMISSION FOR EMERGENCY MEDICAL TREATMENT/MEDICAL INSURANCE: I confirm that the above named persons and/or participants are enrolled. I fully understand that Stars & Stripes Athletics staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release Stars & Stripes Athletics staff members to render temporary first aid to named persons and/or participants in the event of any injury or illness, and if deemed necessary by the Stars & Stripes Athletics staff deem this to be necessary. Additionally, I hereby agree to individually provide for all medical expenses, which may be incurred by named persons and/or participants as a result of any injury sustained while participating at Stars & Stripes Athletics.				
TUTION PAYMENT, ENCLIMENT AND INSTALLMENT BILLING INFORMATION: 1 understand if the above named person is enrolled in a program that has installment monthly tuition charges on my account until Jubmit a Stars & Stripes class drop request. This document may be obtained from the Stars & Stripes Business Office or downloaded from our website www.StarsandStripesKids.com. If I am dropping a class (with installment monthly tuition charges on my account until Jubmit a Stars & Stripes can after the month begins I will not receive credits and/or refunds for the tremaining classes in the current month. I understand that Stars & Stripes on give make-up classes, credit and/or refunds for, but not limited to programs, class(es), inflatables, gymnastics, tumbling, cheerleading, clinics, camps, private lessons, birthday parties, birthday party guests, bring a friend, play time, field trips, Special Olympics, swimming, competitions, preschool, group activities, family fun inglish, parents night out, trampoline, dance, karate, circuit training, unning, free weights, conditioning, obstacle courses, personal training, group fitness and athletic training, missed and/or additional training, unning, offer eveights, conditioning, obstacle courses, personal training, group fitness and athletic training, missed and/or can and the programs are final for any product and/or service purchased and/or provided by Stars & Stripes account. From the date of registration forward my entire account balance shall be due the 1st of each month. I understand this only applies to programs that have installment monthly tuition. Fee for other products and/or services shall be paid for at the time of purchases and/or registration forward my entire account balance shall be due the 1st of each month. I understand this only applies to programs that have installment monthly tuition. Fee for other products and/or services shall be paid for at the time of purchas				
COMPETITIVE TEAMS EARLY TERMINATION FEES: Upon commencement, acceptance and placement onto a team including, but not limited to competitive teams, gymnastics teams and cheerleading teams I understand that Stars & Stripes has made financial commitments and obligations on my behalf based on my commitment. If a team member does not fulfill the season obligation as set forth in "The Role of the Athlete-Parent" and in the "Competitive Program Procedures Manual" or is removed from the team for any and all reasons I am financially responsible, including but not limited to meet fees, competition fees, crossover fees and/or any and all other fees associated with such team season. The gymnastics team season end date is June 30th and the competitive cheer team season end date is April 30th.				
PAYMENT AND INSTALLMENT BILLING INFORMATION: AUTOMATIC installment billing: We will charge your credit or debit card the 1st of each month. If provided, an e-mail notification will be sent any time a payment is processed. Automatic installment billing only applies to programs that have installment monthly tuition. Fees for other products and/or services shall be paid for at the time of purchase and/or registration. I understand if the above named persons and/or participants are enrolled in a program that has installment monthly tuition I am continuously enrolled in the program and I will incur installment monthly tuition charges on my account until I submit a Stars & Stripes class drop request.				
You can pay your account balance before the 1st of each month at the Stars & Stripes Business Office, online at www.StarsAndStripeskids.com or using our APP. If my payment is not received on and/or before the 1st of the month (regardless of what day of the month the 1st falls on or if it is a holiday), Stars & Stripes will bill and/or charge a manual account management fee of \$25 on my account on the 2nd of each month. I understand that Stars & Stripes does not send a monthly bill and it is my responsibility to pay my account balance at the Stars & Stripes Business Office. I understand this only applies to programs that have installment monthly tuition. Fees for other products and/or services shall be paid for at the time of purchase and/or registration. I understand if the above named persons and/or participants are in a program that has installment monthly tuition I am continuously enrolled in the program and I will incur installment monthly tuition charges on my account until I submit a Stars & Stripes class drop request.				
If I register for a program that is FREE or DOES NOT have installment monthly tuition at thi agreement.	s time <u>I do und</u>	erstand that	if I do enro	oll in a program that does have installment tuition I agree to the terms contained in this
**Programs that are <u>FREE</u> are <u>EXEMPT</u> from supplying credit info until such time you register for a program that has monthly tuition**				
I have read and completely understand all terms and conditions of the agreement.				
Step 3: Signature: X				Date:
Select this box if you are signing this form with an Electronic Signature (digital signature or typed-printed name). I agree and understand that by signing this form with an Electronic Signature that this is the legal equivalent of my manual/handwritten signature.				

