



145 Old Peachtree Road, NW  
Suwanee, GA 30024  
770-945-3424

#### **PAYMENT INFORMATION**

Each family is required to have a valid credit card on file. We accept Visa/MasterCard, check or cash. **Any changes in credit card information are due in the office no later than the 20th of the month.**

\_\_\_\_\_ **A \$25 SERVICE FEE will be charged for all Non-Sufficient Funds and Declined transactions.**

#### **REGISTRATION FEE**

The registration fee is paid at the time you initially enroll and **every August** thereafter. The class family registration fee is \$50 and the team family registration fee is \$70. This fee is non-refundable.

#### **TUITION POLICY**

\_\_\_\_\_ **Tuition is due, and must be received, on the 25th of each month to guarantee your child's class for the following month. If payment is not received by the last day of the preceding month, a \$15 late fee per class will be assessed and you authorize Georgia Gymnastics Academy, Inc. to charge your credit card.** If the credit card declines, you have 24 hours to make payment before the computer tags your child as inactive and releases their class spot. Late payments are accepted but will not guarantee your child's class same day or same time. Our Program is a year-round program with a monthly tuition based on an average of four classes per month. If it is a five-class month, we do not increase tuition; if it is a three-class month, we do not prorate. **Accounts must be paid in full for the child to participate in class/practice, Fun Meet, camps and special activities.**

#### **WITHDRAWAL POLICY**

\_\_\_\_\_ **Your child is enrolled in a class until we receive written notice. If you choose to withdraw, you must complete a withdrawal form available in the office or on our website, by the 15th of the month prior to withdrawal.**

**PLEASE NOTE: You have agreed to and are responsible for payment for your child's class and/or team tuition until the end of the month following your written notice of withdrawal (due on the 15th of the month prior to withdrawal) regardless if your child attends the class or team practice. You are responsible for any balance due on your account.**

#### **MAKE-UP POLICY**

You are allowed one make-up class per month regardless of the number of classes missed. Make-ups are scheduled at the office. If the scheduled make-up is missed without prior notice, the make-up is forfeited. You have 60 days to schedule your make-up before it expires.

#### **LATE PICK-UP FEE POLICY**

GGA cannot be responsible for your child once their class/practice has been dismissed. There will be a "late pick-up" fee of \$15 for the first ¼ hour, and \$25 for every ¼ hour thereafter once a child's class/practice has ended.

#### **EMAIL ADDRESS**

It is imperative that we have your current email address and that you are reading our emails/newsletters. As our company becomes more automated and green conscience, emailing is becoming our preferred form of communication. Your email address will allow us to inform you of important billing information, upcoming events, and special activities.

#### **INCLEMENT WEATHER**

In case of inclement weather, closing notices will be posted on Facebook and voicemail (allow to ring until voicemail picks up).

<b>I HAVE READ AND AGREE TO ALL OF THE ABOVE</b>
--

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

Please turn over to continue

### **VIEWING, PARKING LOT AND COMMON GROUNDS**

The viewing area of GGA is provided as a convenience to our clients and is self-monitored. Running, jumping, yelling, climbing and all other horseplay is strictly forbidden. All children must be accompanied by an adult while in the viewing area. Parents are responsible for their children while in the viewing area, parking lot, and common grounds. Management does not take responsibility and is not liable for any injuries and /or lost and damaged personal property occurring in the viewing area, parking lot or other common grounds of GGA. Please be considerate of others while at GGA. Management reserves the right to ask those not respecting these guidelines to leave.

### **RELEASE OF LIABILITY**

You understand that it is the express intent of the GEORGIA GYMNASTICS ACADEMY, INC. to provide for the safety and protection of your child and, in consideration for allowing your child to use these facilities, you hereby release the GEORGIA GYMNASTICS ACADEMY, INC., its officers, employees, teachers and coaches, for all liability from any and all damages and injuries suffered by your child while under the instruction, supervision, or control of the GEORGIA GYMNASTICS ACADEMY, INC.

### **ACKNOWLEDGE OF RISK**

As parent/legal guardian, you hereby consent to the person participating in the GEORGIA GYMNASTICS ACADEMY, INC. programs. You recognize that potentially severe injuries, including permanent paralysis or death can occur in any activity involving height or motion, including gymnastics. You also realize that your child will be performing and training on all gymnastics events plus various other training devices including trampoline.

### **MEDICAL RELEASE**

You specifically appoint GEORGIA GYMNASTICS ACADEMY, INC. to authorize emergency medical treatment for your child, to execute consent, orders or other documents for any medical procedure which is required to save the life of your child, or to prevent a deterioration of any existing or new medical condition, or to stabilize any medical condition, which may not deteriorate, as fully as you could if you were present. This acknowledgement of risk, waiver of liability and medical release having been read thoroughly and understand completely, is signed voluntarily as to its content and intent.

### **COVID-19 WAIVER**

In consideration for attending Georgia Gymnastics Academy (GGA) the person signed below (Parent/Guardian) acknowledges and agrees: The COVID-19 represents a serious health risk. GGA is relying on the truthfulness and accuracy of the certification below. Parent/Guardian accepts any and all risk directly relating to COVID-19. **Parent/Guardian will notify GGA if they are tested positive, have symptoms of or have come in contact with anyone who is tested positive for COVID-19 at any time in the future.** Also, in consideration for attending practice/classes at GGA, Parent/Guardian represents and warrants that to the best of their knowledge, neither they nor anyone with whom they reside with or anyone they have come in direct contact with during the past 14 days: **(1)** has been diagnosed with or tested positive for COVID-19; **(2)** is awaiting results of a test for COVID-19; **(3)** is under quarantine as recommended by a medical professional; **(4)** has any of the symptoms of COVID-19 as set forth by the Center for Disease Control (CDC); **(5)** has had contact with someone who Parent/Guardian believes has or potentially could have COVID-19; **(6)** has had contact with someone who had contact with a person diagnosed with COVID-19 or who is believed to have COVID-19 or the symptoms thereof.

### **NOTICE OF EXEMPTION**

Georgia Gymnastics Academy, Inc. is NOT a Licensed Child Care Facility. This program is NOT required to be licensed by the Georgia Department of Early Care and Learning and this program is exempt from State Licensure requirements.

### **PHOTO CONSENT**

We would like your permission to include your daughter/son's picture on our website. No names will be printed with the pictures. Please mark the appropriate box below.

\_\_\_\_\_ I **DO** give my consent to use my child's photo \_\_\_\_\_ I **DO NOT** give my consent to use my child's photo

Parent/Guardian Name (Printed) \_\_\_\_\_ Child's Name (Printed) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_