



Tryout/Enrollment Form - 2021

5721 Huettner Court - Norman, OK
405.688.8000
www.victorygymnastics.com

TRYOUT DATE: ___/___/___ Day: _____ Time ___:___ CLASS: _____

Child's Name _____ D.O.B. ___/___/___

School: _____ Grade _____ Previous gym/experience _____

Home Address _____ City _____ **OK** Zip _____

Mom's Name _____ Cell: (____) _____ -- _____
Email: _____@_____.

Dad's Name _____ Cell: (____) _____ - _____
Email: _____@_____.

How did you hear about Victory Gymnastics? Referred by _____
 Driveby Relative Internet Other _____

Any recent injuries or emotional limitations that the instructors should know about? If so, explain: _____

Special needs child? Yes No Sorry, but we are not equipped or have trained coaches to teach "special needs" children.

In case of emergency, contact: _____ Phone: (____) _____ - _____

FRONT LOBBY / COMMON AREAS (CLOSED)

• Front lobby and common areas are closed except for paying tuition, registering your child or proshop purchases. _____ (Initials)

REC GYM / TEAM GYM POLICY

• **Face masks must be worn at all times when in building.** Team Gym & Rec Gym are closed to parents/spectators/siblings. _____ (Initials)

WAIVER AND RELEASE

• I hereby forever waive, release & discharge Victory Gymnastics, their employees, officers, coaches, directors & agents from any damages & injuries sustained by my child in connection with said use of the gym's equipment & facilities in any sport that my child is or was involved in. I authorize the representatives of Victory Gymnastics to provide any emergency medical services that may be required due to any injury that may occur at Victory Gymnastics. I also give Victory Gymnastics permission to video and photograph my child and use any photos and/or videos for website, promotion or display. _____ (Initials)

ANNUAL REGISTRATION FEE / MONTHLY TUITION / LATE FEES

- Annual Registration Fee (\$45.00) per student is due at enrollment and again in 12 months. No refunds. _____ (Initials)
- Tuition is due on the 1st of each month, regardless of your child's practice schedule. _____ (Initials)
- Late Fee (\$15.00) is charged if tuition is not received by the 7th. _____ (Initials)

WRITTEN CANCELLATION NOTICE

• I agree to notify the Front Desk **IN WRITING prior to the 1st of the month** if I decide to withdraw my child from class at Victory Gymnastics. _____ (Initials)

VICTORY OLYMPICS & CHRISTMAS CLASSIC RECITALS

• I agree to register my child/children in the Spring & Fall Recitals and understand that a \$15.00 Recital Fee per child will be charged to my account for each of these Recitals. \$15.00 will be charged each February 1st (Victory Olympics) and September 1st (Christmas Classic). Fees are non-refundable. _____ (Initials)

PRACTICE APPAREL

• Girls must wear leotard (*no 2-piece outfits*). No jewelry or bracelets. _____ (Initials)

PARKING

• **Do not park** between buildings. Do not park in Ewing Irrigation parking lot until after 5:00pm Parking is allowed on Huettner. _____ (Initials)

_____ Signature _____ Signature

❖ Office Use Only ❖

Times A Week	Day(s)	Class(s)	Time(s)	Coach(s)
_____ X Week	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> R <input type="checkbox"/> F		:	

Registration Tuition Sibling Discount Total: \$ _____ + \$ _____ = \$ _____ Check Cash Credit Card