

2011-2012 Premier Membership Selection Form

American Twisters

Updated 8-1-2011

Annual Membership Fee
\$27/Single \$47 Family

Preschool Premier Pass Membership
 \$37/month 1st child or
 \$77/month family

Preschool Premier Plus
 Moms Morning Out Program
 \$89.00/month 1st child
 \$119.50/month family
 9-12:30 Fridays
 Includes unlimited open gym
Every Friday is Mothers Day at Twisters!

Preschool Premier Benefits
 Unlimited Access to Pre-School Open Gym
 Sessions (ages 5 and under with parent)
 10% off Camp Twisters

Pre-School Premier Plus
 Pre-School Premier Plus Family
 Pre-School Premier Single Pass
 Pre-School Premier Family Pass

Annual Membership Fee
\$27 Single/\$47 Family

Grade School Premier Pass Membership
 \$89.50/month 1st child or
 \$119.50/month family

Premier Pass Benefits
 Unlimited Access to Grade School Open
 Gym Sessions (Ages 5+)
 10% off Camp Twisters
 10% off Select Pro-Shop Items

Grade School Open Gym
 Tuesdays @ 7:00-8:00
 Thursdays @ 7:00-8:00

Choose the Grade School Premier Pass Below

Grade School Premier Single Pass
 Grade School Premier Family Pass

Parent/Guardian Information:

Last Name: _____, First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Mobile/Work Phone: _____ Email: _____

How did you hear about American Twisters? _____

1st Child

Last Name _____ First Name _____

Sex _____ Date of Birth _____

2nd Child

Last Name _____ First Name _____

Sex _____ Date of Birth _____

3rd Child

Last Name _____ First Name _____

Sex _____ Date of Birth _____

4th Child

Last Name _____ First Name _____

Sex _____ Date of Birth _____



American Twister's Premier Membership Credit Card Authorization Form

Annual Membership Fees

This is a annual fee as long as you maintain membership. The membership fee is equal to the type of membership you choose, single or family.

Annual Member Fee: \$27/\$47

Monthly Membership Fee: See the reverse to choose your monthly membership type and corresponding fee. Your monthly membership fee will be automatically charged to your credit card on the 10th of each month.

Congratulations for making an investment in your child/family's fun and fitness with a Premier Membership at American Twisters!

Annual Membership fee \$ _____

You chose the _____ **Membership,**

Your total monthly charges will be \$ _____ **each month.**

Cancellation Policy:

You must cancel your membership by providing Twister Gymnastics 30 days written notice. There is no fee to cancel membership. **Initial** _____

I, _____, hereby authorize American Twisters to charge my credit card below for my child/children's monthly membership at American Twisters. I understand that my card will be charged the Total Monthly Charge shown above every month, from this month forward, unless a change is made to my membership or I decide to cancel. I understand that cancellation of my membership requires 30 days written notice.

Credit Card Type: _____ #: _____ Exp: _____

Name on Card: _____ Signature: _____

Date: _____

2011-2012 Participation Agreement Form

Acknowledgement of Risk and Waiver of Liability Please Read before signing!

To the best of my knowledge, my child(ren) is now in good health and is physically capable of participating in the program (s) offered by TGBR/AT. I will not bring my child(ren) for his/her lesson if suffering from any respiratory, infectious or contagious illness or disease. I understand that if such an illness is apparent, my child(ren) will be removed from class for that day.

I recognize that potentially severe injuries, including but not limited to permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to gymnastics, tumbling, trampoline, cheerleading, dance, ball sports, and martial arts. Being fully aware of these dangers, I voluntarily consent for my child/children to participate in all Twister Gymnastics Boca Raton, Inc. and/or American Twisters, Inc. (TGBR/AT) programs and accept all risks associated with that participation.

In consideration for allowing my child to use these facilities, I, on my own behalf and the behalf of my child and our respective heirs, administrators, executors and successors, hereby forever release and covenant not to sue TGBR/AT, its officers, directors, share holders, employees, volunteers, and all others associated with the corporation(s) from all liability for any and all damages and injuries suffered by my child or myself while under all instruction, supervision, or control of TGBR/AT. I also understand that TGBR/AT retains the rights to use any photographs, videotapes, motion picture recordings, or any other record of events for publicity, advertising, or any legitimate purposes.

I hereby agree to individually provide for all present and possible future medical expenses which may be incurred by my child as a result of any injury sustained while participating at or for TGBR/AT.

I have read and understand this acknowledgment of risk and waiver of liability and I voluntarily affix my name in agreement.

Parent's Signature _____ Date: _____

Medical Insurance Company: _____