

2008-2009 Premier Membership Selection Form

Twister Gymnastics, Parties & Cheer

Updated January 2009

Preschool Premier Pass Membership

\$47/month 1st child or

\$77/month family

Enrollment Fee: \$47 single membership or

\$77 family membership

Preschool Premier Benefits

Unlimited Access to Pre-School Open Gym Sessions (ages 5 and under with parent)

10% off Camp Twisters

10% off Select Pro-Shop Items

25% off Party Deposits

Gym- Mini Twister's "Mommy's Morning Out" for just \$29/per child!

Choose the Preschool Premier Pass Below

Pre-School Premier Single Pass

Pre-School Premier Family Pass

Grade School Premier Pass Membership

\$77/month 1st child or

\$107/month family

Enrollment Fee: \$77 single membership or

\$107 family membership

Premier Pass Benefits

Unlimited Access to Grade School Open Gym Sessions (Ages 5+)

10% off Camp Twisters

10% off Select Pro-Shop Items

25% off Party Deposits

Saturday Night "Carvel Parent's Night Out" for just \$17/per child!

Choose the Grade School Premier Pass Below

Grade School Premier Single Pass

Grade School Premier Family Pass

Premier PLUS Membership Package

\$87/month 1st Preschool child or

\$127/month Preschool family

Enrollment Fee: \$87 single membership or

\$127 family membership

\$97/month 1st Grade School child or

\$137/month Grade School family

Enrollment Fee: \$97 single membership or

\$137 family membership

Premier PLUS Benefits

Unlimited access to Pre-School and/or Grade School Open Gym

PLUS unlimited access to Saturday Night

"Carvel Parent's Night Out" (ages 5+)

and/or Gym-Mini Twister's "Mommy's Morning Out" (ages 3-5)

10% off Camp Twisters

10% off Select Pro-Shop Items

25% off Party Deposits

Choose the Premier PLUS Pass Below

Premier PLUS Single Pass

Premier PLUS Family Pass

Parent/Guardian Information:

Last Name: _____, First Name: _____

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

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

How did you hear about Twister Gymnastics & Cheer? _____

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



Twister's Premier Membership Credit Card Authorization Form

Congratulations for making an investment in the health, fun and fitness of your family with a Premier Membership at Twister Gymnastics!

You chose the _____ Membership

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

Cancellation Policy:

You may cancel your membership by providing Twister Gymnastics 30 days written notice. There is no fee to cancel membership.

I, _____, hereby authorize Twister Gymnastics to charge my credit card below for my child/children's monthly membership at Twister Gymnastics. I understand that my card will be charged the Total Monthly Charge shown above on or about the 15th of each 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: _____

2008-2009 Participation Agreement Form

Acknowledgement of Policies, Risk and Waiver of Liability - Read before signing!

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 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 Twister Gymnastics, 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 Twister Gymnastics. 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 Twister Gymnastics. I also understand that Twister Gymnastics retains the rights to use any photographs, videotapes, motion picture recordings, or any other record of events for publicity, advertising, or any legitimate purposes. Twister's reserves the right to cancel classes that do not have sufficient enrollment and transfer students. Additionally, I understand and agree to abide by the Twister Make-up policy.

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

Parent's Signature _____ Date _____

Family Medical Insurance Provider: _____