



PRIVATE LESSONS REGISTRATION

Private/Semi Private lessons are available on a monthly basis in 30 minute, 45 minute, or 1 hour time slots. Lessons are scheduled according to coach availability. We reserve the right to reschedule private lessons if coach availability changes. Please complete the form below and you will be contacted regarding your request. Please complete a separate form for each enrolling child.

PRIVATE LESSON INFO & POLICIES

MAKE-UPS: We do not reschedule, prorate tuition, or refund payments due to missed lessons.

WITHDRAWAL: The office must receive written notification by the 20th of the student's last month if you are cancelling your lessons. Verbal notification will not be acceptable. You will be charged a monthly tuition until a written drop notice has been received.

TUITION & FEES: Lessons are to be paid for in advance. Payment is due the first class lesson of each month. A \$10.00 late charge will be applied to all unpaid accounts on the 6th of the month. Tuition may vary each month. Cost is based on the number of lessons that fall in each month. We do not send monthly statements. An annual registration fee of \$50 during initial registration in addition to the first month's tuition. **Students with unpaid balances will not be admitted to class the following month.**

PRIVATE LESSONS (1 STUDENT)		
SELECT	LESSON LENGTH	MONTHLY TUITION
<input type="checkbox"/>	30 minutes	\$160 (\$40/lesson)
<input type="checkbox"/>	45 minutes	\$220 (\$55 lesson)
<input type="checkbox"/>	60 minutes	\$300 (\$75/lesson)

SEMI-PRIVATE LESSONS – 2 STUDENTS		
SELECT	LESSON LENGTH	MONTHLY TUITION
<input type="checkbox"/>	30 minutes	\$120 (\$30/lesson)
<input type="checkbox"/>	45 minutes	\$160 (\$40/lesson)
<input type="checkbox"/>	60 minutes	\$200 (\$50/lesson)

CHILD'S NAME: _____ BIRTHDATE: _____ AGE _____ M F

PARENT NAME: _____ PHONE: _____ EMAIL: _____

FULL MAILING ADDRESS: _____

ADDITIONAL GUARDIAN NAME & CONTACT: _____

PLEASE NOTE ANY IMPORTANT CONCERNS OR NEEDS WE SHOULD BE AWARE OF: _____

REQUESTED COACH: _____ PREFERRED DAY _____ PREFERRED TIME _____

_____(Initial) **RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT** I, the undersigned parent/guardian of the student listed below, do hereby grant the authority to the staff at Harpeth School of Gymnastics (HSG) to render judgment concerning medical assistance in the event of an accident, injury, or illness. I further authorize simple first aid, and medical or surgical diagnosis and treatment which may be deemed necessary. The very nature of the activity carries a risk of physical injury. No matter how careful the student and coach are, no matter how many spotters are used, no matter what height is used or what landing surface exists, the risk cannot be eliminated. The risk of injury includes minor injuries such as bumps and bruises and more serious injuries such as broken bones, dislocations, and muscle pulls. The risk also includes, and always includes, catastrophic injuries such as permanent paralysis or even death from landings or falls on the back, neck or head. I hereby waive and hold harmless any and all HSG staff and any other staff working in conjunction with HSG.

_____(Initial) **TUITION POLICY AGREEMENT** Harpeth Gymnastics has my permission to run all unpaid charges on the 5th using the credit/debit card on file, and my signature is not required for this transaction. I understand that a convenience fee will be charged for credit card transactions. If my card is declined, I understand a \$10 late fee will be applied to my account on the 6th. **In order to cancel authorization of my credit card, I understand that I must come into the office to sign and date the cancellation form.**

VISA MASTERCARD CARD NUMBER: _____ EXP DATE _____

CARDHOLDER NAME: _____ CVV _____ ZIP _____

I agree to the terms and waivers above. _____

Parent/Guardian Signature

Date

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FOR OFFICE USE ONLY DATE _____ REG FEE _____ TUITION _____ TOTAL _____ **CANC DATE** _____
BALANCE DUE _____ METHOD OF PAYMENT CASH CHECK CC SCHEDULED BY _____ **PARENT INITIAL** _____