Family Information / Billing Co	<u>ntact</u>	
Parent/Guardian First Name:	Last Name	e:
Address:	City:	State: Zip:
Phone 1:	Phone 2:	Phone 3:
E-Mail:	fail: How Did You Hear About Us?	
Other Emergency Contact Name:	Other E	mergency Contact #:
Student Information		Special Medical Conditions/Allergies/Restrictio
1 <sup>st</sup> Student Name:	D.O.B	
2 <sup>nd</sup> Student Name:	D.O.B	
3 <sup>rd</sup> Student Name:	D.O.B	
4 <sup>th</sup> Student Name:	D.O.B	
occur in sports or activities involving height or motion, in party guests, bring a friend, karate, open gym, rock wall ct aforementioned persons participating in any and all progronsideration for allowing my child to use this facility, I, o FOREVER RELEASE American Allstars Athletic Center, its suffered by my child while under the instruction, supervis gymnastics, karate, fitness, ninja, cheerleading, tumbling, warn the child through Safety Messages and our teaching	sluding but not limited to inflatables, gymnastics, tumbling, cheerlead imbing, climbing ropes, fitness activities, ninja, golf, dance, baton tw ams offered by or transportation provided by American Allstars Athle n my own behalf and the behalf of my child and our respective heirs, officers, directors, shareholders, employees or other representatives on or control of American Allstars Athletic Center. I also understand golf, baton, and dance. The parent should warn the child according to style and progressions.	cognize that potentially severe injuries, including permanent paralysis or death car ling, clinics, camps, training sessions, private lessons, birthday parties, birthday irling, and field trips. Being fully aware of these dangers, I voluntarily consent to the tic Center and I ACCEPT ALL RISKS associated with that participation. In administrators, executors, and successors, hereby CCVENENT NOTTO SUE and s, whether paid or volunteer, from all liability for any and all damages or injuries that it is the parent's responsibility to warn the child about the dangers of o what the parent feels is appropriate. American Allstars Athletic Center will only
occur in sports or activities involving height or motion, in arty guests, bring a friend, karate, open gym, rock wall of forementioned persons participating in any and all progro- consideration for allowing my child to use this facility, I. o "OREVER RELEASE American Allstars Athletic Center, its suffered by my child while under the instruction, supervis ymmastics, karate, fitness, inija, cheerleading, tumbling, warn the child through Safety Messages and our teaching PERMISSION FOR EMERGENCY ME and will provide coverage while he/she is enrolled. I fully elease American Allstars Athletic Center staff members to medical help including calling of an ambulance for said che-	chuding but not limited to inflatables, gymnastics, tumbling, cheerleac imbing, climbing ropes, fitness activities, ninja, golf, dance, baton twans offered by or transportation provided by American Allstars Athle n my own behalf and the behalf of my child and our respective heirs, officers, directors, shareholders, employees or other representatives on or control of American Allstars Athletic Center. I also understand golf, baton, and dance. The parent should warn the child according the style and progressions.  DICAL TREATMENT/MEDICAL INSURANCE understand American Allstars Athletic Center staff members are not poor neder temporary first aid to my child in the event of any injury or ill ild. Additionally, I hereby agree to individually provide for all medical	fling, clinics, camps, training sessions, private lessons, birthday parties, birthday irling, and field trips. Being fully aware of these dangers, I voluntarily consent to the tic Center and I ACCEPT ALL RISKS associated with that participation. In administrators, executors, and successors, hereby COVENENT NOT TO SUE and s, whether paid or volunteer, from all liability for any and all damages or injuries that it is the parent's responsibility to warn the child about the dangers of
poccur in sports or activities involving height or motion, in arry guests, bring a friend, karate, open gym, rock wall of forementioned persons participating in any and all progrossideration for allowing my child to use this facility, I, of FOREVER RELEASE American Allstars Athletic Center, its suffered by my child while under the instruction, supervis gymnastics, karate, fitness, injia, cheerleading, tumbling, warn the child through Safety Messages and our teaching PERMISSION FOR EMERGENCY ME and will provide coverage while hefshe is enrolled. I fully release American Allstars Athletic Center staff members to elease American Allstars business office of while participating in programs offered through American Continuously enrolled in the program and I will in any be obtained from American Allstars business office or he last day of the month. If I stop a class after the month of guarantee make-up classes, credit and/or refunds for, missed and/or cancelled due to holiday, vacation, illness, and/or provided by American Allstars Athletic Center. Cor in classes after the month of guarantee make-up classes, credit and/or refunds for, using early of the pain for at the time of purchase and/or registration forward my entire account balance shall be shall be paid for at the time of purchase and/or registration cocount. Payments will be processed with the payment in coclection/ attorney asyments, including but not limited to collection/ attorney asyments, including but not limited to collection/ attorney	studing but not limited to inflatables, gymnastics, tumbling, cheerleac imbing, climbing ropes, fitness activities, ninja, golf, dance, baton twans offered by or transportation provided by American Allstars Athle in my own behalf and the behalf of my child and our respective heirs, officers, directors, shareholders, employees or other representatives on or control of American Allstars Athletic Center. I also understand golf, baton, and dance. The parent should warn the child according the style and progressions.  DICAL TREATMENT/MEDICAL INSURANCE inderstand American Allstars Athletic Center staff members are not ported temporary first aid to my child in the event of any injury or ill idi. Additionally, I hereby agree to individually provide for all medical Allstars Athletic Center.  AND BILLING INFORMATION I understand if my concurrence curring monthly tuition charges on my account to redwind decrease to the concurrence of the remaining class but not limited to programs, class(es), clinics, camps, training session wather or any other reason. American Allstars Athletic Center does not extra charge although it will be considered a make-up for classes to for everyone concerned. I am responsible to make timely payments due the 1st of each month. I understand this only applies to program. If my payment is not received on or before the due date, American.  In my payment is not received on or before the due date, American. In the program of the due of the due date, American in the first with the first of the control of the soft of the staff of th	ining, clinics, camps, training sessions, private lessons, birthday parties, birthday iriting, and field trips. Being fully aware of these dangers, I voluntarily consent to the tic Center and I ACCEPT ALL RISKS associated with that participation. In administrators, executors, and successors, hereby COVENENT NOTTO SUE and s, whether paid or volunteer, from all liability for any and all damages or injuries that it is the parent's responsibility to warn the child about the dangers of o what the parent feels is appropriate. American Allstars Athletic Center will only I confirm that my child is in good health and I have medical insurance on my child hysicians or medical practitioners of any kind. With the above in mind, I hereby Iness, and if deemed necessary by the American Allstars Athletic Center staff to se
pactur in sports or activities involving height or motion, in atry guests, bring a friend, karate, open gym, rock wall offorementioned persons participating in any and all progromsideration for allowing my child to use this facility, I. of FOREVER RELEASE American Allstars Athletic Center, its suffered by my child while under the instruction, supervis gymnastics, karate, fitness, inija, cheerleading, tumbling, warn the child through Safety Messages and our teaching are the child through Safety Messages and our teaching person of the child through Safety Messages and our teaching and will provide coverage while he/she is enrolled. I fully release American Allstars Athletic Center staff members to medical help including calling of an ambulance for said of while participating in programs offered through American while participating in programs offered through American Pulling of the mother of the last day of the month. If I stop a class after the month ond guarantee make-up classes, credit and/or refunds for, missed and/or cancelled due to holiday, vacation, illness, and/or provided by American Allstars Athletic Center. Cor five classes during the month instead of four there will be out nicely and is a far less confusing payment arrangement of registration forward my entire account balance shall be beaut payments, including but not limited to collection/ attorney may account.  All currently enrolled students will be charge	studing but not limited to inflatables, gymnastics, tumbling, cheerlead imbing, climbing ropes, fitness activities, ninja, golf, dance, baton twans offered by or transportation provided by American Allstars Athletic on the respective heirs, officers, directors, shareholders, employees or other respective heirs, officers, directors, shareholders, employees or other representatives on or control of American Allstars Athletic Center. I also understand golf, baton, and dance. The parent should warn the child according to style and progressions.  **DICAL TREATMENT/MEDICAL INSURANCE** Inderstand American Allstars Athletic Center staff members are not poor ender temporary first aid to my child in the event of any injury or ill idl. Additionally, I hereby agree to individually provide for all medical Allstars Athletic Center.  **AND BILLING INFORMATION**   understand if my circum recoccurring monthly tuition charges on my account or downloaded from our website www.AmericanAllstarsKids.com. If I are begins I will not receive credits and/or refunds for the remaining cash but not limited to programs, class(es), clinics, camps, training sessis but not limited to programs, class(es), clinics, camps, training sessis wather or any other reason. American Allstars Athletic Center does tingent on availability American Allstars Athletic Center may issue a no extra charge although it will be considered a make-up for classes it for everyone concerned. I am responsible to make timely payments due the 1st of each month. I understand this only applies to program. If my payment is not received on or before the due date, American. Sthod/information that is kept on-file with American Allstars Athletic Center business o emains overdue, understand that my enrollment in classes will be car fees! court costs. I understand that monthly payment amounts may we defend the program of the content of	ining, clinics, camps, training sessions, private lessons, birthday parties, birthday triting, and field trips. Being fully aware of these dangers, I voluntarily consent to the Center and I ACCEPT ALL RISKS associated with that participation. In administrators, executors, and successors, hereby COVENENT NOT TO SUE and s, whether paid or volunteer, from all liability for any and all damages or injuries that it is the parent's responsibility to warn the child about the dangers of o what the parent feels is appropriate. American Allstars Athletic Center will only contain the parent feels is appropriate. American Allstars Athletic Center will only chysicians or medical practitioners of any kind. With the above in mind, I hereby lness, and if deemed necessary by the American Allstars Athletic Center staff to sel expenses, which may be incurred by my child as a result of any injury sustained child is enrolled in a program that has reoccurring monthly tuition I a until the end of the month that I submit a Stop Class form. This docume am stopping a class (with reoccurring monthly tuition) it must be done on or before ses in the current month. I understand that American Allstars Athletic Center does ons, private lessons, birthday parties, bring a friend, camps, open gym, and field tr not issue refunds. All sales are final for any product and/or service purchased Free Pass to a designated class as a make-up for a missed class. If I should receiv missed while we are closed for holidays. During the course of a year this averages to fmy balances due on my American Allstars Athletic Center account. From the cis that have recocurring monthly tuition. Fees for other products and/or services all starts Athletic Center vaicount. From the cis that have recocurring monthly tuition will be sent any time a playment is ffice in writing that the authorization should be terminated. If for whatever reason, all stars will be responsible for all costs incurred for collection of any delinquent
pactur in sports or activities involving height or motion, in atry guests, bring a friend, karate, open gym, rock wall offorementioned persons participating in any and all progronsideration for allowing my child to use this facility, I, o CREVER RELEASE American Allstars Athletic Center, its suffered by my child while under the instruction, supervis gymnastics, karate, fitness, inija, cheerleading, tumbling, warn the child through Safety Messages and our teaching PERMISSION FOR EMERGENCY ME and will provide coverage while he/she is enrolled. I fully release American Allstars Athletic Center staff members to medical help including calling of an ambulance for said of while participating in programs offered through American TUITION PAYMENT, ENROLLMENT.  Continuously enrolled in the program and I will in may be obtained from American Allstars business office of he last day of the month. If I stop a class after the month of guarantee make-up classes, credit and/or refunds for, missed and/or cancelled due to holiday, vacation, illness, and/or provided by American Allstars Athletic Center. Cor five classes during the month instead of four there will be unticley and is a far less confusing payment arrangement fregistration forward my entire account balance shall be shall be paid for at the time of purchase and/or registration forward my entire account balance shall be shall be paid for at the time of purchase and/or registration and supments cannot be processed with the payment morcessed. I acknowledge that this authorization will remanyments, including but not limited to collection/ attorney my account.	studing but not limited to inflatables, gymnastics, tumbling, cheerleac imbing, climbing ropes, fitness activities, ninja, golf, dance, baton twans offered by or transportation provided by American Allstars Athle in my own behalf and the behalf of my child and our respective heirs, officers, directors, shareholders, employees or other representatives on or control of American Allstars Athletic Center. I also understand golf, baton, and dance. The parent should warn the child according the style and progressions.  DICAL TREATMENT/MEDICAL INSURANCE inderstand American Allstars Athletic Center staff members are not ported remporary first aid to my child in the event of any injury or ill idia. Additionally, I hereby agree to individually provide for all medical Allstars Athletic Center.  AND BILLING INFORMATION I understand if my discussionally. I hereby agree to individually provide for all medical Allstars Athletic Center.  AND BILLING INFORMATION I understand if my discussionally in the event of any injury or ill individually in the event of any injury or ill into the event of any injury or ill	ting, clinics, camps, training sessions, private lessons, birthday parties, birthday triting, and field trips. Being fully aware of these dangers, I voluntarily consent to the Center and I ACCEPT ALL RISKS associated with that participation. In administrators, executors, and successors, hereby COVENENT NOT TO SUE and s, whether paid or volunteer, from all liability for any and all damages or injuries that it is the parent's responsibility to warn the child about the dangers of o what the parent feels is appropriate. American Allstars Athletic Center will only contact the parent feels is appropriate. American Allstars Athletic Center will only only sicians or medical practitioners of any kind. With the above in mind, I hereby tiness, and if deemed necessary by the American Allstars Athletic Center staff to selexpenses, which may be incurred by my child as a result of any injury sustained child is enrolled in a program that has reoccurring monthly tuition I a until the end of the month that I submit a Stop Class form. This docume am stopping a class (with reoccurring monthly tuition) it must be done on or before ses in the current month. I understand that American Allstars Athletic Center does ons, private lessons, birthday parties, bring a friend, camps, open gym, and field tr not issue refunds. All sales are final for any product and/or service purchased Free Pass to a designated class as a make-up for a missed class. If I should receive so finy balances due on my American Allstars Athletic Center account. From the dis shat have reoccurring monthly tuition. Fees for other products and/or services allstars Athletic Center account. From the dis shat have reoccurring monthly tuition. Fees for other products and/or services allstars Athletic Center account. From the dis shat have reoccurring monthly tuition. Fees for other products and/or services allstars Athletic Center account. From the dis shat have reoccurring monthly tuition. Fees for other products and/or services allstars Athletic Center account. From the d
occur in sports or activities involving height or motion, in party guests, bring a friend, karate, open gym, rock wall caforementioned persons participating in any and all progress consideration for allowing my child to use this facility, I, of FOREVER RELEASE American Allstars Athletic Center, its suffered by my child while under the instruction, supervis gymnastics, karate, fitness, ninja, cheerleading, tumbling, warn the child through Safety Messages and our teaching PERMISSION FOR EMERGENCY ME and will provide coverage while he/she is enrolled. I fully trelease American Allstars Athletic Center staff members to medical help including calling of an ambulance for said of while participating in programs offered through American Miller and the sufficient of the said and the sufficient of the s	studing but not limited to inflatables, gymnastics, tumbling, cheerleac imbing, climbing ropes, fitness activities, ninja, golf, dance, baton twans offered by or transportation provided by American Allstars Athle in my own behalf and the behalf of my child and our respective heirs, officers, directors, shareholders, employees or other representatives on or control of American Allstars Athletic Center. I also understand golf, baton, and dance. The parent should warn the child according the style and progressions.  DICAL TREATMENT/MEDICAL INSURANCE inderstand American Allstars Athletic Center staff members are not poor nearly the style and progressions.  DICAL TREATMENT/MEDICAL INSURANCE inderstand American Allstars Athletic Center staff members are not poor nearly the style and progressions.  AND BILLING INFORMATION I understand if my discussionally, I hereby agree to individually provide for all medical Allstars Athletic Center.  AND BILLING INFORMATION I understand if my discussionally. I hereby agree to individually provide for all medical Allstars Athletic Center.  AND BILLING INFORMATION I understand if my discussionally in the style agree to individually provide for all medical allstars Athletic Center.  AND BILLING INFORMATION I understand if my discussion to the style and the style of the style and the style of the	ting, clinics, camps, training sessions, private lessons, birthday parties, birthday triting, and field trips. Being fully aware of these dangers, I voluntarily consent to the Center and I ACCEPT ALL RISKS associated with that participation. In administrators, executors, and successors, hereby COVENENT NOT TO SUE and s, whether paid or volunteer, from all liability for any and all damages or injuries that it is the parent's responsibility to warn the child about the dangers of o what the parent feels is appropriate. American Allstars Athletic Center will only contain the parent feels is appropriate. American Allstars Athletic Center will only chapter and the parent feels is appropriate. American Allstars Athletic Center will only chapter and the parent feels in a program that had I have medical insurance on my child hysicians or medical practitioners of any kind. With the above in mind, I hereby liness, and if deemed necessary by the American Allstars Athletic Center staff to sel expenses, which may be incurred by my child as a result of any injury sustained child is enrolled in a program that has reoccurring monthly tuition I a until the end of the month that I submit a Stop Class form. This docume am stopping a class (with reoccurring monthly tuition) it must be done on or before see in the current month. I understand that American Allstars Athletic Center does now, private lessons, birthday parties, bring a friend, camps, open gym, and field tr not issue refunds. All sales are final for any product and/or service purchased Free Pass to a designated class as a make-up for a missed class. If I should receiv missed while we are closed for holidays. During the course of a year this averages to fmy balances due on my American Allstars Athletic Center account. From the dies that have reoccurring monthly tuition. Fees for other products and/or services Allstars Athletic Center will initiate electronic payments for any balances due on month of the my the payment is fine of any delinquent vary as classes are added or

If you would like to stop enrollment you need to fill out a "stop class form" and turn it in during your last month. If the "stop class form" is received after the 1st of the month it will not go into effect until the next month. No refunds are given after the monthly tuition is charged. (Example: If you want January to be the last month you are charged for class, turn the "stop class form" in anytime between January 1st - 31st and then you will be taken out of class, so no charge will be incurred on February 1st or beyond.) You can find this form at the front desk or online at American Allstars Kids.com. You can fill the form out anytime during your last month with us and turn it in to the main office to go into effect at the end of the month. If you do not fill out the "stop class form" your account will automatically be charged to save your space in class. Your request to stop class must be in writing; therefore, you cannot un-enroll you over the phone. Once you stop a class your space in class will become available for others to sign up for. You are only eligible to do make-up classes during months you are enrolled in class.

Signing below means I understand if my child is enrolled in a program that has reoccurring monthly tuition I am continuously enrolled in the program and I will incur reoccurring monthly tuition charges on my account until I submit a "stop class form" to the American Alistars office, which will go into effect at the end of the month.		
Guardian Signature: X	Date:	



### <u>AmericanAllstarsKids.com</u> 248-668-9805 3275 & 3285 Martin Parkway Commerce, MI 48390

# New Student Basic Information Sheet

Welcome to American Allstars Athletic Center! Home of American Allstars Gymnastics Academy, Ryukyu Karate, Allstars Ninja Academy & Allstars Dance.

Below are a few important pieces of information about our programs. Please read over it and feel free to contact us with any questions.

We are so happy to have you and your family with us!

#### **Monthly Payment**

To secure your space in class we have an **automatic re-enrollment system**. On the 1st of every month EVERYONE who is in a reoccurring program will be automatically re-enrolled in class. The only way for us to guarantee your space for the next month of classes is by using a credit card, which will stay on file and automatically be charged on the 1st of the new month. If you choose to pay cash or check just do so BEFORE the 1st of the month and your credit card will not be used. If there isn't a card on file and payment is not made by the 1st, your space may be forfeited. If you would like to stop enrollment you need to fill out a "stop class form." If the "stop class form" is received after the 1st of the month it will **not** go into effect until the next month. No refunds are given once the monthly tuition has been charged on the 1<sup>st</sup> of the month.

#### **How to Stop a Class**

If you wish to stop a class you need to let us know by filling out the "stop class form." You can find this form at the front desk or online at <a href="AmericanAllstarsKids.com">AmericanAllstarsKids.com</a>. You can fill the form out anytime during your last month with us and turn it in to the main office. As long as we receive the form during your last month of enrollment, you will not be re-signed up or charged until you call back to re-enroll. If you do not fill out the "stop class form" we will assume you wish to continue and we will re-sign you up on the 1st of the month to save your space in class. (Example: If you want January to be the last month you are charged for class, turn the "stop form" in anytime between January 1st - 31st and then you will be taken out of class, so no charge will be incurred on February 1st or beyond.) Once you stop a class your space in class will become available for others to sign up for.

# **Character Development Program**

At *American Allstars* we believe in teaching more than great athletics. We want to capitalize on the wonderful opportunity you have given us to positively impact your child through our WOW Character Enhancement Program. The concepts covered in class will not only help them with their athletic endeavors, but will serve them in the classroom, at home, with friends, in the work place, and for a life time. Our instructors will engage students in group discussions that are age appropriate and will help students understand the word of the month, how it applies to their life, and why it is an important concept. Some examples of the monthly words are: confidence, appreciation, teamwork, and courage.

### **Other Important Information**

<u>Waiver on File:</u> Every student who comes to a class, camp open gym, skill clinic, birthday party, etc... needs to have a waiver on file filled out and signed by a parent or guardian. No one may participate without a signed waiver on file. You can find the waiver form at the front desk or online at <u>AmericanAllstarsKids.com</u>.

<u>Closings:</u> American Allstars Athletic Center sits between many school districts; therefore, we **DO NOT** follow the closing decisions of any particular district. Please call the office at **(248) 668-9805** or check our web site at <u>AmericanAllstarsKids.com</u> to receive any closing information. We post our holiday closings on our website and at the front desk. We also will make reminder announcements at the end of class. We try to stay open as much as possible and will rarely be closed for "snow days."

Make-Up Classes: All students are allowed one (1) make-up class <u>every other month</u>, after they have missed their class, as long as they are still enrolled in the month they do the make-up. All make-ups must be scheduled with the office ahead of time and are contingent upon availability. Karate classes & dance classes have the option to make-up in a regularly scheduled class that has space. All recreational gymnastics classes will have a designated make-up class offered on specific Fridays or Saturdays once a month. Students must sign up in advance to attend and space is limited. When you receive five classes during the month instead of four, there will be no extra charge; although it will be considered a make-up for classes missed while we are closed for holidays and are only open for three. Make-up classes can only be done while your student is currently enrolled and must be made up before the season ends. There are no make-up options for our gymnastics team or baton twirling programs.

<u>Cleanliness:</u> In our increasingly health-conscious culture we believe our customers deserve the cleanest facility possible. We provide a hygienic environment for you, our customer, because you deserve it. We contract with EnviroMaster which includes weekly commercial sanitation and odor control of our rest rooms and viewing areas. The activity areas are regularly cleaned and sanitized to keep the kids and instructors safe. The gymnastics area also has a state-of-the-art fresh air system that circulates fresh air throughout the gym and provides air conditioning during the warm months. We are dedicated to making our facility a step above the rest.

<u>Special Events:</u> We host & participate in many special events throughout the year and we encourage you to join us: December Holiday Spectacular, Kid's and Women's Safety Seminars, June Gymnastics Olympics, Dance Recital, Red Cross Certification Training, Karate Belt Graduations and much more! We will post upcoming events throughout the gym, on the website, on our social media sites and send out an e-mail to keep you up-to-date. Special events are non-refundable.

<u>Summer Schedules:</u> Karate keeps the same continuous schedule year round. Ninja keeps the same continuous program September – August. Dance offers continuous classes September – June and then a separate summer schedule. Baton offers classes September – May. Gymnastics runs continuous classes September – June and then a flex schedule during July & August that allows you to sign up and pay by the class; instead of by the month. During the summer each department also offers a multitude of camps each week with a variety of themes and activities for all.

<u>Location & Parking:</u> American Allstars is located at the roundabout at Oakley Park and Martin Parkway and has 2 separate (and not connected) parking lots / entrances.

- South entrance off of Martin Parkway: Main Office, Gymnastics, Tumbling, Karate & Baton
- North entrance off of Oakley Park Rd: Ninja & Dance & Red Cross Training

If you have any questions please feel free to send an e-mail or give us a call. We would love to hear from you!

AmyMelvaGaryJoshRachelGymnasticsDanceKarateNinjaBaton

American Allstars Kids.com

248-668-9805

office@AmericanAllstarsKids.com