

# 2024-2025 Camper Personal Information and Registration Form

*The following form must have each section completed to the best of your knowledge. By signing below, you agree to all provisions and covenants contained in this application. Our staff will keep this form and its contents confidential.*

Name of Child: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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Mother's Name: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

(We will send you monthly newsletters, reminders and any coupons regarding the gym and/or programs)

Emergency Contact (other than parents): \_\_\_\_\_ Relationship: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Does your child have any allergies we should be aware of? Yes No

If yes, please explain: \_\_\_\_\_

(Please Note: We cannot administer medication at any time)

Does your child have any behavioral concerns that camp staff should be aware of that will affect his/her participating in activities? If yes, please explain. \_\_\_\_\_

Does your child take any medication on a regular basis? Yes No

If yes, please explain: \_\_\_\_\_

Does your child currently take a class in one of our programs? Yes No

If yes, what day and time does your child have class? \_\_\_\_\_ Please be sure that you send proper clothes on the day your child has class. Camp staff will be sure to send your child to class.



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Summer Camp Registration Only: Is your child able to swim without assistance?      Yes                      No

(Please Note: If your child needs assistance with swimming, please pack whatever floats/life jackets your child will need on swim days)

Please list anyone who is allowed to pick your child up from camp other than parents. (Please Note: Until staff become aware of who you/others on your pickup list are, all will have to show proper identification for us to release your child from camp) Should you need to add other names to your child's pick up list please call our office.

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

## **Consent for Picture Release**

I acknowledge that Victory Sports Center will take photos of the students for promotional purposes. Photos taken for advertising and promotional services may include your child or children. Victory Sports Center may use these photos with no compensation to you or your child. I agree that it is okay to have my child's photo posted on our website and/or Facebook or other promotional outlets.

\_\_\_\_\_  
**Parent/Guardian Initials**

## **Behavior System**

Victory Kidz Program uses a 3 Strike System of Behavior for any student who cannot follow the rules of the Gym or Camps especially in regards to the safety of other students and staff. Strikes are given only when the student has failed to comply with requests to correct behavior.

### **Strike 1: Verbal Warning**

Students are given Strike 1 to make the student aware of the unacceptable behavior and the specific way to fix it or ensure that it doesn't happen in the future.

### **Strike 2: Call to Parents**

Parents are advised of the unacceptable behavior the child is continuing to demonstrate despite having been given a verbal warning to correct behavior. If mis-behavior continues, the parent will be called back to send the child home.

### **Strike 3: Child Sent Home**

Call to send child home with possible suspension from Program with no refund for missed day(s).

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND  
INDEMNITY AGREEMENT ("AGREEMENT")**

In consideration of participating in any activity at VICTORY GYMNASTICS, LLC, doing business as Victory Sports Center. I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releases" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue VICTORY GYMNASTICS LLC, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the Releases from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY

AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

\_\_\_\_\_  
Date: \_\_\_\_\_  
Printed name of participant

\_\_\_\_\_  
Date: \_\_\_\_\_  
Printed name of participant

\_\_\_\_\_  
Date: \_\_\_\_\_  
Printed name of participant

\_\_\_\_\_  
Signature of participant ( Over the age of 18yrs/old)

**PARENTAL CONSENT**

AND I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the Minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby Release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

\_\_\_\_\_  
Date: \_\_\_\_\_  
Printed name of Parent/or Legal Guardian

\_\_\_\_\_  
Signature of Parent/or Legal Guardian