

Shooting Stars of Hickory, LLC.

Class Policies and Rules

105 31st ST PL SE

Hickory, NC 28602

Welcome to Shooting Stars of Hickory! We are very pleased that you have chosen our program and look forward to having your child grow through the sport of gymnastics or cheerleading.

Mission Statement:

Shooting Stars Gymnastics is committed to provide high-quality training in a safe, positive, and nurturing environment for every child that comes to our facility. We are devoted to teach children the positive life skills of discipline, goal setting, perseverance, fitness, and self-confidence.

Registration Fees:

There is an annual registration fee of \$45 due upon registering August- December. Registration fees will be pro-rated for those enrolling from January- July.

Tuition, Late Fees & Returned Checks:

Tuition must be paid by the 10th of each month. We accept Cash, Check, MC, or VISA. Tuition is based on four (4) weeks of class per month. There is a \$20 late fee for any payments received after the 10th of the month. In order to ensure fairness to all, if your account has not been paid by the 15th of the month, your child will not be allowed to participate in class until all fees are paid in full. There is a \$25 fee for any returned checks.

Make-up Classes:

Shooting Stars wants to encourage everyone to make-up missed classes due to illness or school functions. To schedule a make-up class, please contact the office.

Withdrawal:

We require a notice – email, verbal, phone call – that your child has decided to withdraw. All outstanding balances are due at the time of withdrawal.

Dress Code:

Girls- Hair should be pulled back out of participant's face. No jewelry, socks, shorts with zippers, long fingernails. A leotard is required for all – Softe shorts or spandex shorts/capris/pants are permitted over leotard. No dance tights should be worn.

Boys- T-shirt and shorts without zippers are required.

Parent Observation Room:

We do have a parent observation room. However, in order to avoid student distraction, parents are NOT allowed in the gym area with the exception of the Mommy & Me class. All spectators must watch from the Observation Area. Parents attempting to "coach" will be asked to leave the viewing area. Parents are expected to supervise siblings in the waiting area. Siblings loud enough to distract coaches on the floor will be asked to leave.

Bathroom Breaks:

Due to the limited class time, please make sure your child has gone to the restroom before class.

Monthly Schedule:

The schedule will be posted on the bulletin board (by the leotards). Please note the actual class schedule does not match the monthly payment schedule. This may require some adjustment to the tuition for those who join the program mid-month.

If you have any questions just ask us at the front desk or call us at (828) 327-0001. Our office hours are Monday- Thursday from 4PM- 7:30PM. Email: shootingstarsofhickory@gmail.com

Policies, tuition, dates of classes, holidays are all subject to change at the discretion of Shooting Stars of Hickory, LLC.

Shooting Stars of Hickory, LLC

Release and Indemnification Agreement

Read Carefully Before Signing:

1. Assumption of Risks and Responsibility
 - a. Participants/Parents/Legal guardians recognizes, understands, appreciates, and acknowledges: (i) the risks and dangers of injury that may occur in the course of being on the grounds of Shooting Stars and participating in the activities (including but not limited to gymnastics, tumbling, cheerleading stunts); (ii) that my presence at Shooting Stars or my participation in activities may involve risk of bodily injury (including but not limited to injuries to bones, joints, muscles, and internal organs), illness, disability, or paralysis (whether temporary, permanent, total, or partial), death, or other harm; and (iii) that Participant voluntarily engages in the activities with adequate prior knowledge of such risks and dangers.
 - b. Participant/Parent/Legal Guardian voluntarily decides to participate in activities, and agrees to and does assume all legal and financial responsibility for: (i) any and all risks and dangers referred to in preceding paragraph; (ii) any and all injuries, damages, and losses; (iii) and all treatment, hospitalization, and other care rendered to Participant in the event of his/her injury, illness, or other emergent circumstance in connection of any of the foregoing.
2. Coaching and Instruction
 - a. Participant will receive instruction by USAG or USASF certified individual including coaches and instructors. I understand that coaches/instructors may not be physically close enough to any given student at any given time in order to prevent an incident/injury from occurring.
3. Use of Image
 - a. I hereby grant Shooting Stars the non-exclusive, perpetual right to use my child's name, image, likeness, or voice and to photograph, record or video, in connection with my child's participation to activities, for the purpose of promoting the sport of gymnastics and all of the programs of Shooting Stars. Such use may be in any medium, whether now known or hereafter devised, including, but not limited to, print, electronic, television, film digital, website, online, video streaming, and social media entries. In no event, however may Shooting Stars, by virtue of specific grant of rights, use my child's Identification for purposes of my endorsement of any commercial product or service without my prior written permission. This grant of rights shall be in addition to, and shall in no manner limit or affect, any other consent, permission, grant, or license that I may have given or in the future may give to Shooting Stars for the use of my Identification or performances in or related to the sport of gymnastics.
4. Term
 - a. This Waiver and Release of Liability shall remain valid for the entire year in which it is executed (expiring on July 31st of that year).

I am the parent or guardian of _____. My child desires to participate in the tumbling, gymnastics, or cheerleading program at Shooting Stars of Hickory, LLC. I have read the rules, expectations, and regulations applicable to the desired program and fully understand all parts of each therein without any reservation.

Signature of Parent/Guardian

Date

Signature of Witness

Date