



After School Program

Welcome to Coral Reef Gymnastics after school program. We are so happy that you have entrusted your child in our after school program and it shows that physical activity is important to you and to your child. Our staff is USAG safety certified and they have all had finger print background checks completed. They are dedicated to providing a warm and nurturing environment to every child. Our program follows the public school calendar. We pick up your child/ren daily from school and bring them to our facility. At which time they will have the opportunity to complete their homework and have a snack. **We do not provide snacks.** At 3pm, 4pm, or 5 pm they will go to gymnastics/fitness/martial arts class for 55 minutes. **Pick up is at 6:00 pm daily**, there is a **fee added if you are late of \$10 per 10 minutes you are late.** In order to avoid this fee there is an extended care option until 7 pm and that is an additional \$25.00 per month per child and until 8 pm \$50. If you are going to be late please call and let us know.

On early release days we will also pick up your child/ren from school at no additional cost and bring them to our facility. They will have the opportunity to play games, watch a movie or have free time in the gym and then they will attend their regularly scheduled class time. Coral Reef Gymnastics follows Broward County Public School Schedule. **We do NOT pickup from Charter or Private Schools that have early release or school days on days Broward County Public Schools do not.**

We do our best to get the students here in a timely fashion. If the bus is not available to get to the students on time there are circumstances that we will use personal vehicles to transport our students, ie only a couple of students at the school, bus breakdown etc... Our buses and vehicles are driven by our background checked coaches. If you do not want the students to be picked up by personal vehicles please let us know so that we can make other arrangements. If your child needs a booster seat you must provide one for him/her with their name written on it. It will remain at the gym throughout the school year.

There are no refunds for tuition paid. **If you would like to withdraw from the program you must give a 30 day written notice on or before the first of the month for the following month.** **Tuition is monthly and will not be prorated since the months vary in lengths.** *You are welcome to bring your child to class during school breaks or days off since you are paying for the classes.* There will however be an additional fee for full day/weekly camp, which begins at 8:30 am.

Between the hours of 1:15-2:45 most of the coaches and office staff are out doing school pick ups at that time. If you are going to be picking up your child from school or have made other arrangements for that day please let us know **before 1:15 pm or 11:15 am** on early release days by calling and leaving a message. If we do not get a phone call or message we wait at the school until the school lets us know that your child is not coming which in turn makes us late to all the other schools. You will be charged a \$5.00 no show fee after the first warning

If your child misses class he/she is able to make up the class but you must call or email to schedule the make-up. If you need to pick up your child during class time you must wait until he/she has stretched/cooled down, it is an important part of any fitness program. ***Please do not call them out in the middle of class unless absolutely necessary or let the office staff or instructor know ahead of time, it disrupts the class and the instructor.***

Our mission is to provide quality gymnastics' programs at all levels from Beginners to Elite in a positive nurturing environment.

15851 SW 41 St, Suite 100, Davie, FL 33331

954-430-1530 Facsimile 954-680-3879 www.coralreefgymnastics.com

email CoralReefGym@gmail.com

WE ARE LICENSED & INSURED

_____ Initials



The schedule will be as follows:

- 2 pm Bus Pick Up
- 2:30-2:45 pm Arrive at CRG 2:45-
- 3:00 pm Change & Snack 3:00-3:55
- pm Class
- 4:00-5:00 pm Homework/Quiet Time
- 5:00-6:00 pm Movie/Games

We have added playground time from 5-5:45 pm Monday through Friday. Since the playground is a short drive the buses will drive them over and bring them back. **If you are planning on picking them up between 5-5:45 pm you will need to call us and let us know ahead of time so that we do not take them to the park.**

If they do not have class at 3 pm they may start their homework but they still have quiet time at 4 pm. We are here to assist with homework but we are not tutors and we cannot sit the entire time with one student. For example we can read instructions and assist when they are having difficulty understanding the material but we cannot force the child the child to complete their homework. We also have computers for the students to complete homework. If they have class at 4pm there will not be a quiet room for them to complete their homework. We encourage a class each day for the necessary physical activity to avoid childhood obesity and diabetes.

Please know that if at any time you have questions or concerns our staff is happy to help you. Welcome to Coral Reef Gymnastics!

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TUITION PAYMENT POLICIES

- ◆ I understand that tuition is due on the 1st of each month. I also understand that a \$20.00 Late Fee will be charged to my account if tuition is paid after the 5th of the month.
- ◆ I understand that registration and monthly tuition are non-refundable.
- ◆ I understand that tuition will only be prorated the month of registration if necessary. No other months will be prorated. This includes December & June. You may attend your scheduled class or enroll in camp in June.
- ◆ I understand that my credit card will be charged for any unpaid balances on the 6th of the month including late fees.
- ◆ I understand that Coral Reef Gymnastics & Cheer After School Care Program follows the Broward County Public School schedule and the **tuition fee structure is for 38 weeks**. *The cost of the school year is divided into 10 equal payments. I also have the choice of paying a weekly fee which includes a surcharge.* This includes school closings for all holidays and student non-attendance days. I understand that **NO tuition reimbursement or credit will be given for holidays, natural disasters, absences, illness, or vacations.** Days missed from this program will **not be prorated** nor made up in any fashion.
- ◆ I understand that Coral Reef Gymnastics follows Broward County Public School Schedule. Coral Reef Gymnastics does NOT pickup from Charter or Private Schools that have early release or school days on days Broward County Public Schools do not.
- ◆ I understand that the After Care Program hours commence from the time of Broward County School's daily dismissals until 6:00 p.m. In the event that I am late, I understand that I will be charged \$10.00 for every 10 minutes past 6:00 p.m. until pick-up. Which will be collected at the time of pick up.
- ◆ I understand that a **"30-Day Written Drop Notice"** is required to drop from the After Care Program. I also understand that the notice must be received before the 1st of the month prior to the month dropping. I understand that I am responsible for tuition for the month notice was not given. Notices received AFTER the 1st week will not be processed until the 1st week of the following month and will take effect the following month.
- ◆ I understand that if my account is "60 Days Past Due" it will be filed with a Credit Collections agency. I also understand that I am responsible for any fees incurred in the process of collection.

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Student Expectations	Progressive Discipline Program
<p>After Care Program Rules have been established to ensure the safety and security of each child. Students are expected to behave appropriately at all times and not cause danger to themselves or others.</p> <ul style="list-style-type: none"> ❖ Students shall follow directions including rules of the gym and those given by coaches or other adults in a position of authority. ❖ Students are expected to respect themselves, others and their belongings. This includes: <ul style="list-style-type: none"> • Keeping hands and feet to themselves. • Not touching others' belongings. • Refraining from name calling. ❖ Student involvement is expected in all planned activities and they must be willing to participate in the set-up and clean up. ❖ Students are not permitted to use obscene, inappropriate or offensive language. ❖ Students are responsible for their own property and money, i.e., lunch boxes, back packs etc. ❖ Electronics are not to be used unless they are for homework purposes. ❖ Misuse or abuse of program facilities, equipment or supplies will not be tolerated. 	<ul style="list-style-type: none"> ❖ Time Out or Cool Down: <ol style="list-style-type: none"> 1. The student will receive a warning prior to being placed in timeout or will be given a cool-down period. The time out period for a will be no longer than 5 minutes in duration. 2. The time-out/cool-down period will be followed by a discussion between the student and the coach. Discussion shall include the reason for the time-out, behavior that caused the time-out, alternative behaviors and the consequences if the behavior recurs. <ul style="list-style-type: none"> ❖ Verbal Warning: If a student is placed in time-out/cool down twice in one day, the parent will receive verbal notification. ❖ Written Notice: <ol style="list-style-type: none"> 1. A student who receives 3 time-outs in one day will receive a written notice. 2. A discussion between the student and coach shall take place when a notice is issued. 3. A written notice shall be documented and retained for the After Care Program files. 4. Parents shall be made aware of the student's behavior and be provided with a written notice of the incident(s). 5. Parents, students and the After Care Director shall have a discussion about behavior, future alternatives and future consequences should the behavior reoccur. <ul style="list-style-type: none"> ❖ Suspension: <ol style="list-style-type: none"> 1. After receiving 3 written notices, a subsequent violation of the same rules will result in a 1 to 3 day suspension. 2. Suspensions will be documented and retained for the After Care Program files. 3. Parents will be immediately notified if a suspension is imminent. 4. Parents shall be provided a written notice of the suspension. 5. Parents, students and the After Care Director discuss the behavior, future alternatives and future consequences should the behavior reoccur.

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CORAL REEF GYMNASTICS BUS DISCIPLINE Rules and Procedures

Students who do not follow the bus rules can be a hazard to the safety of other students on the bus.

Therefore the following rules must be adhered to:

1. No standing or moving out of your seat while the bus is in motion.
2. No rough housing with other children at any time while on the bus. This means a *"hands to yourself at all times"* policy.
3. Pens and pencils may only be used for the purpose of doing homework. Any other use will result in the pen/pencil being taken away from the student.
4. No throwing of any objects while on the bus.
5. Students are responsible for picking up their trash before leaving the bus.
6. No bus property destruction is permitted.
7. Loud noise is prohibited.
8. Students must be silent at Rail Road Crossings. The bus driver will raise his hand with two fingers held in the shape of a "V" to announce a Rail Road Crossing.
9. Disrespectful talk or language to bus driver or students will not be tolerated.

Discipline Procedures:

First offense – A written notice will be sent home to be signed by parents acknowledging that the parent has discussed the serious nature of proper behavior on the bus.

Second Offense – A written warning will be sent home to be signed by parents, warning that one more offense will mean termination of permission to ride the bus, until the parents make an appointment to meet with the gym owner and the bus driver.

Third Offense – Termination of permission to ride the bus until the parent meets with the gym owner and the bus driver.

If after the parent meeting, permission is granted to return to the bus, a fourth offense will mean complete dismissal for the remainder of the school year to ride the bus.

Please sign below to acknowledge that you have read, understand and have discussed the rules with your child.

Students' Name: __

Signature of Parent/or Legal Guardian

Date

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Student Information

Name 1:		Sex:	Age:	DOB: ____/____/____	
School Attending:		School Ph:		Grade:	
Parent 1's Name & Social:		Parent 2's Name Social:			
Address:		City:		ST:	Zip:
Home Ph:		Work Ph:		Cell Ph:	
E-mail Address:		Alternative Contact:		Emergency Name & Ph:	
Are there any medical conditions to which we should be alerted? <input type="radio"/> Yes <input type="radio"/> No Please Specify:					

I understand that it is the intent of Coral Reef Gymnastics & Cheer to provide for the safety and protection of my child therefore, if I am not available, I authorize Coral Reef and its employees to seek attention for my child and to execute orders to authorize emergency medical treatment, which may be required.

Signature of Parent/or Legal Guardian Date

How did you hear about us? Friend Advertisement/Publication-which one? _____
 Birthday Party Internet/Website Other _____

Persons Authorized to Pick-up (other than Parents)

Name:	Ph:	Name:	Ph:
Name:	Ph:	Name:	Ph:

Days Attending & Payment Information (fees are charged monthly and will be due on the 1st of each month)

Monthly Program fees: 3 classes-\$237 4 class-\$255 5 class-\$280 6 class-\$306 7 class-\$332 8 class \$357						*You may choose as few or as many days as you require, however; the days must remain consistent (days may not vary from week to week).
<input type="radio"/> Days Attending*:	M <input type="radio"/>	T <input type="radio"/>	W <input type="radio"/>	TH <input type="radio"/>	F <input type="radio"/>	
Weekly Program fee: \$72 per week for 3 classes \$77 for 4 classes \$92 per week 5 classes						

Annual Registration Fee (\$35 from Jan-June/\$17.50 from July-Dec) Late Pick up 7pm \$25 8pm \$50 \$

<input type="radio"/> Monthly Self-Pay due on 1 st (\$20 late fee after the 5 th)	<input type="radio"/> Automatic Credit Account Debit (must complete authorization agreement)	\$
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FOR OFFICE USE-Form of Pmt.:	<input type="radio"/> Credit Card	<input type="radio"/> Check # _____	<input type="radio"/> Cash	\$ TOTAL
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CREDIT CARD ON FILE (REQUIRED GUARANTEED FORM OF PMT.)
*charged to account only if payment is not received on or before the 5th of each month



Card Holder Name:	Card Type:
Credit Card #:	Expiration Date: Last 3 Digits on Back CID#

Billing Address & Zip Code (if different from Client):

I fully understand the Coral Reef Gymnastics tuition payment policies of which I am in receipt. In the event that my account is past due, I authorize Coral Reef Gymnastics to charge the credit card indicated above to collect payment for unpaid tuition and all other unpaid items charged by me and/or student(s) on my personal account that are outstanding on the 5th of each month. I understand the charges applied to my credit card will include a \$20.00 late fee as specified in the payment policies. If the charge is disputed with the credit card company I will be charged additional late fees for each month the payment is delayed. I understand that tuition will only be prorated the month of registration if necessary. No other months will be prorated. This includes December & June. You may attend your scheduled class or enroll in camp in December & June. I understand that Coral Reef Gymnastics & Cheer After School Care Program follows the Broward County Public School schedule and the tuition fee structure is for 38 weeks. The cost of the school year is divided into 10 equal payments. I also have the choice of paying a weekly fee which includes a surcharge. This includes school closings for all holidays and student non-attendance days. I understand that NO tuition reimbursement or credit will be given for holidays, natural disasters, absences, illness, or vacations. Days missed from this program will not be prorated nor made up in any fashion.

I am aware that check payments or automatic checking account debit transactions with insufficient funds will result in a \$35 returned check fee to cover bank penalty charges plus any additional fees. I understand that if my account is "60 Days Past Due" it will be filed with a Credit Collections agency. I also understand that I am responsible for any fees incurred in the process of collection.

Coral Reef Gymnastics requires a **"30-Day Written Drop Notice"** which is strictly enforced. This notice must be received before the first of the month PRIOR to the month dropping. Failure to give notice will result in full payment for one month of tuition. I have read and agree to comply with this requirement

Signature of Parent/or Legal Guardian Date



CRG TRANSPORTATION / FIELD TRIP PERMISSION

I authorize EVERGLADES GYMNASTICS INC, DBA CORAL REEF GYMNASTICS + CHEER to transport my child _____ on the Coral Reef Bus.

Parent Signature _____ Date _____

Permission to participate in Coral Reef Activities

As parent/legal guardian of _____, I hereby consent to the aforementioned child to participate in CORAL REEF GYMNASTIC programs. I recognize that potentially severe injuries, including permanent paralysis or death can occur in any activity involving height or motion, including gymnastics. I also realize that my child will be performing and training on all gymnastics events plus other various training device including trampoline.

I understand that it is the express intent of EVERGLADES GYMNASTICS INC, DBA CORAL REEF GYMNASTICS + CHEER to provide for the safety and protection of my child and in consideration for allowing my child to use the facilities, I hereby release EVERGLADES GYMNASTICS INC, DBA CORAL REEF GYMNASTICS + CHEER, its' officers, employees, teachers and coaches from all liability for any and all damages and/or injuries suffered by my child while under the instruction or supervision of EVERGLADES GYMNASTICS INC, DBA CORAL REEF GYMNASTICS + CHEER.

In the event of a medical emergency, if I am not available, I authorize anyone employed by CORAL REEF GYMNASTICS to seek medical attention for my child, _____, and to execute consent orders to authorize emergency medical treatment for any medical procedures, which may be required.

This acknowledgement of risk, waiver of liability and medical release having been read thoroughly and understood completely, is signed voluntarily as to its' content and intent.

Parent Signature _____ Date _____

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

In consideration of participating in **EVERGLADES GYMNASTICS INC, DBA CORAL REEF GYMNASTICS & CHEER**, 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 "releasees" 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 **EVERGLADES GYMNASTICS INC, DBA CORAL REEF GYMNASTICS CHEER**, 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 "releasees" 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 Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which 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 or 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

Signature of participant

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 Releases 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

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