



2016-2017 Scarlet Knights Gymnastics Academy Private Instruction

Private instruction is available upon request for gymnasts and cheerleaders seeking to improve skills by working individually with a Rutgers Recreational instructor. Students must be 6 years of age or older to participate in private lessons. Private lessons are offered One on One, Two on one, or Three (or more) on one. There is a different fee per person for each one of these options.

Registration/Payment:

At the first class, the non-refundable registration fee for the current session is collected along with the enrollment form, and the payment for the first class. The Registration Fee will be made payable to Scarlet Knights Gymnastics Academy. Payment for EACH lesson should be made directly to the instructor by cash or check (made to cash or payable to Instructor) at the start of each lesson. Payment will be collected by the instructor before each lesson begins otherwise the lesson will not commence. If a sibling also wishes to take private lessons, there will be a registration fee discount of \$5.00 for that sibling. If any of your children taking privates also wish to take normal classes, they will not have to pay a registration fee again (class fee for class will have to be paid). If your child is already taking a class, you do not have to pay a registration fee.

CANCELLATION POLICY: If you need to cancel your private lesson, you must do so within 12 hours of the start time of your private. If you cancel after this time, or do not show up, there will be a \$15.00 surcharge added to your account/next private. Privates or class registration will not continue until this is paid.

Lesson Scheduling and Instructor Requests:

Lessons must be scheduled during hours of operation, when our normal classes are running (usually Mondays & Thursdays 4:30-8:30pm, Tuesdays & Wednesdays 4:30-7:30pm, and Saturdays 9am-2pm – ask about availability). Lessons must also take place during the dates for the current class session. Please contact our Class Director or Office Manager with your availability, and they will find an instructor available during your requested time. The office phone number and email can be found on the enrollment form. Please provide multiple times that you are available, to allow for a better chance of scheduling your private lesson.

If you are interested in a particular instructor, it is advised that you email the office to verify this instructor's availability prior to registering for private lessons. If the instructor that you requested is unavailable, another instructor will be assigned based upon his/her availability and you will be contacted by the office to finalize lesson details.

Private Lesson Fees

	One on One (1 Student to 1 Instructor)	Two on One (2 Students to 1 Instructor)
Registration Fee (per person) <i>If you are already taking a class, you do not have to pay this fee again</i>	Full Year (Sept-Aug): \$35.00	Full Year (Sept-Aug): \$35.00
Private Lesson Fee (Per person, Per lesson)	\$50.00 / Hour \$40.00 / 45 minutes \$25.00 / Half Hour	\$30.00each/Hour (\$60 total) \$25.00each/45 min. (\$50 total) \$18.00/Half Hour (\$36 total)



2016-2017 Private Class Registration & Enrollment Form

PLEASE RETURN THIS FORM WITH REGISTRATION FEE PAYMENT TO:

Scarlet Knights Gymnastics Academy

College Ave Gymnasium
130 College Avenue
New Brunswick, NJ 08901

Phone: 848-932-7155 Fax: 732-932-1363 E-mail: scarletknightsgymnastics@gmail.com

Family/Child(ren)'s Last Name: _____

Child's First Name & Middle Initial: _____ **Birthday:** _____ **Age:** _____ **Grade:** _____ **Sex:** _____
M/F

Please select which session or sessions your child will be attending:

Fall (Sept 6 – Dec 12) Winter (Jan.3 – May 1) Spring (May13-June 29) Summer (July 17-Aug 17)

Mother's/Guardian's Name: _____ **Cell Phone:** _____

Father's/Guardian's Name: _____ **Cell Phone:** _____

Home Address _____ City/Town _____ State _____ Zip Code _____

E-mail Address (for receipt & important updates) _____ Other Emergency Contact Name/Phone # (Other than parents/guardians) _____

Insurance Company Name _____ Doctor's Name _____

Insurance Company Phone Number _____ Doctor's Phone Number _____

Insurance Policy/Member Number _____ Group Number _____ Doctor's Office Address _____

Please note any other concerns that would aid in instructing you child(ren). Include allergies and medications:

➤ **RELEASE—MUST be signed for your child to be allowed to participate:**

All precautions will be taken to prevent accidents. Simple First-Aid will be administered to all minor injuries. Parents and/or paramedics, ambulance or doctor may be called when necessary. It is hereby agreed that I, my child(ren), my grandchildren, my heirs and executors, waive and release all rights and claims for damages that I may have at any time at Scarlet Knights Gymnastics Academy (SKGA, LLC). I understand that participation in gymnastics and use of its equipment may cause injury (both minor and severe), paralysis, and even death. In such a circumstance, I do not hold Scarlet Knights Gymnastics Academy or its staff and coaches responsible for any injury. By signing below, I agree that all the risks involved in respect to such a program are fully understood and I agree to the previous statements. This release is valid at all terms or months my family and I are enrolled. By signing this release I also agree to all the policies and rules stated in the information packet received before and after registration. This includes payment policies, including any special payment plans and due dates.

Printed Name: _____

Signature: _____ Date: _____

