Phenomenal Flips Gymnastics USA

Registration or Class Transfer Form

Today's Date _____

Student Name	M/F	Age	Class to Add (with Day/Time)	Class to Drop (if any) (with Day/Time)

Payment made today:

Any Previous Balance Owed $_____

Current Month's Tuition $_____

Less Proration for Partial Month (if any) $_____

Last Month's Tuition in Advance $_____

Less Sibling or other Discounts (if any) $_____

Total Payment $_____

Method of payment _____

For Staff Use Only (initial to indicate completion)

_____ Completed Student Info Form & Waiver

_____ If Beginner PS, completed adult waiver

_____ Verified Information with Parent/Guarantor

_____ Made copy of this form for parent/guarantor

_____ Entered Data into Computer System

_____ Added Student to Class Folder Roster

_____ Created or Updated Student Folder

Payment Agreement

By my signature below, I indicate my understanding of and my agreement to Phenomenal Flips' payment policies as follows:

- I understand that upon enrolling my child at Phenomenal Flips, I must pay for the current month (prorated if applicable) plus my child's last month's tuition in advance.
- I understand that each month, tuition is due on or before the 1st day of the month; I realize I will not be billed unless I fail to pay by the 10th of the month.
- If I fail to pay by the 10th of the month, I understand that a $10 late fee will be added to my account to cover Phenomenal Flips' billing costs.
- I understand that when my child begins his or her last month of classes at Phenomenal Flips, I must notify Phenomenal Flips **in writing** to apply the last month's tuition I paid in advance. I understand that Phenomenal Flips must receive that notice **before** billing statements are prepared on the 10th of the month, otherwise I will need to pay a $10 late fee.
- I understand that Phenomenal Flips will add a $20 returned check charge to my account if any of my checks are returned by the bank.
- I understand that if my account is not paid by the 20th of the month, my child will not be allowed to participate in classes until my account balance is made current.

_____

Printed Name of Payment Guarantor for Student's Account

_____ _____

Signature of Payment Guarantor for Student's Account Date