REGISTRATION FORM

DYNAMIX CHEER
Cheerleading Gym

1036 Schooner Avenue, Laser Park, Roodepoort
063 772 9427
www.dynamixcheer.co.za





A ATHLETE'S PERSONAL INFORMATION

Full Name + Surname :

ID Number : **Date Of Birth** : D D M M Y Y

Cell Phone Number :

E-Mail :

Nationality : **Gender** ☐ Male ☐ Female

Do you have any cheer/tumbling experience? : ☐ No ☐ Yes

Grade + Class: :

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B PARENT'S PERSONAL INFORMATION

Full Name :

ID Number :

Cell Phone Number :

E-Mail :

C FINANCIALS

Person responsible for account :

Financial Agreement,
I agree to pay all fees as outlined by Dynamix Cheer;
Annual Registration Fee: R350.00 (includes t-shirt, medal, certificates, and treats).

Monthly Tuition Fees:
I understand and agree to the following terms:
Fees are payable by the last day of each month.
Membership is billed for 12 months per year.
Non-attendance (due to illness, injury, holiday, etc.) does not warrant a refund or discount.
One full calendar month's written notice is required for cancellation. Failure to give notice will result in one month's fee being charged.
No cancellations will be accepted in November.
Failure to pay fees may result in suspension of classes and additional penalties or debt collection charges.
First payment of the year includes monthly fees, registration fee, and any outstanding balances.
EFT payments only (no cash deposits).
By agreeing, I accept full responsibility for the payment of all fees related to my child's membership.

Signature

Date

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D CONSENT

POPIA Consent.
In compliance with the Protection of Personal Information Act (POPIA), I understand and agree that the personal information provided in this form will be used by Dynamix Cheer & Tumbling only for the purposes of class registration, communication, billing, and ensuring athlete safety.
My information will be kept secure, confidential, and will not be shared with third parties without my consent. I understand that I may request access to, correction, or deletion of my personal information at any time by contacting the gym directly

Signature **Date**

MINORS I, the parent/guardian of the athlete listed on this form, hereby give consent for their participation in

classes
and activities at Dynamix Cheer & Tumbling. I also consent to the collection and processing of their personal information, in compliance with the Protection of Personal Information Act (POPIA), for the purposes of class registration, communication, billing, and athlete safety.
I confirm that I have the authority to provide this consent on behalf of the minor athlete and understand that their personal information will be kept secure and confidential.

Signature **Date**

Media Consent.
I hereby grant Dynamix Cheer & Tumbling permission to take and use photographs and/or video recordings of myself/ my child during training, performances, or events. These may be used for coaching purposes, social media, promotional material, and the gym's official website.
I understand that my/ my child's name and personal details will not be publicly shared without my prior consent, and that media will be used responsibly and in line with the Protection of Personal Information Act (POPIA).

: ☐ Yes ☐ No

Signature **Date**

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D CONSENT

General Indemnity and Liability Waiver

I,_____ the undersigned (or parent/guardian if under 18), acknowledge and agree to the following:

I understand that participation in the activities, programmes, or events may involve physical exertion and carry the risk of injury or accident.

I voluntarily accept and assume all risks, including (but not limited to) injury, illness, loss, damage, or expenses that may arise from participation.

I indemnify and hold harmless the organisers, coaches, staff, volunteers, and venue owners from any liability, claims, or damages arising from participation in these activities.

I confirm that I (or my child) am medically fit to participate, and I will disclose any relevant health conditions to the organisers.

I take full responsibility for my personal belongings and understand that the organisers are not liable for any theft, loss, or damage.

I acknowledge that this indemnity applies to all activities, events, practices, and related functions.

By signing below, I confirm that I have read, understood, and accept the above terms of indemnity and waiver of liability.

Signature **Date**

E BANKING DETAILS

BANK:	FNB
ACC TYPE:	GOLD BUSINESS
ACC NR:	63162291967
BRANCH CODE:	250655
REFERENCE:	*ATHLETE NAME + PACKAGE*