



180 White Mills Hill Road  
 PO Box 18  
 White Mills, PA 18473  
 570-470-1365

[www.balancegymnasticsandwellness.com](http://www.balancegymnasticsandwellness.com)  
 balancegymnasticsandwellness@gmail.com

**GENERAL APPLICANT INFORMATION**

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City / State: \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Email \_\_\_\_\_

Child/Children enrolled in current classes:

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

**1. APPLICATION**

I apply for payment installments on behalf of my child/children at Balance Gymnastics and Wellness Center, located at 180 White Mills Hill Road, White Mills, Pennsylvania. I represent and warrant that I am 18 years of age or older and all facts and information set forth above and/or in this Agreement dated this date are true, correct and complete. The Agreement is incorporated by reference and made as a part of this Contact.

Start Date: \_\_/\_\_/\_\_\_\_

End Date: \_\_/\_\_/\_\_\_\_

**2. MEMBERSHIP TYPES AND DUES**

**ONE HOUR CLASS**

| <b>Beginner, Intermediate, Hot Shots, Ninja</b> | <b>Down payment due at registration<br/>(applied toward tuition)</b> | <b>Monthly Installment Amount<br/>(11 payments)</b> | <b>3 Payment Plan</b> | <b>2 Payment Plan</b> | <b>Discounted total due if paid in full before season start<br/>one open gym pass with full tuition</b> |
|---|--|---|-----------------------|-----------------------|---|
| 12 month rate - \$900                           | \$100  | \$72.73   | \$266.67              | \$400                 | <b>\$850</b>  |
| 7 month rate - \$665                            | \$100  | \$94.17   | N/A                   | \$282.50              | <b>\$625</b>  |



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### 45 MINUTE CLASS

| Prek, Tiny Tot        | Down payment due at registration<br><i>(applied toward tuition)</i> | Monthly Installment Amount<br><i>(11 payments)</i> | 3 Payment Plan | 2 Payment Plan                      | Discounted total due if paid in full before season start |
|-----------------------|---|--|----------------|-------------------------------------|--|
| 12 month rate - \$828 | \$100   | \$66.18  | \$242.67       | \$364                               | <b>\$788</b>   |
| 15 Week rate - \$265  | \$100   | N/A  |                | Balance due by 7 <sup>th</sup> week |  |

### TWO HOUR CLASS

| Advanced, Super Star   | Down payment due at registration<br><i>(applied toward tuition)</i> | Monthly Installment Amount<br><i>(11 payments)</i> | 3 Payment Plan | 2 Payment Plan | Discounted total due if paid in full before season start<br><i>one open gym pass with full tuition</i> |
|------------------------|---|--|----------------|----------------|--|
| 12 month rate - \$1362 | \$100   | \$114.73   | \$420.67       | \$631          | <b>\$1312</b>  |
| 7 month rate - \$935   | \$100   | \$139.17   | N/A            | \$417.50       | <b>\$895</b>   |

- **Holidays are worked into the schedule – there are no makeups for these.**
- **We cannot guarantee a makeup if your child misses class, but we will try to accommodate you.**
- **We will offer a makeup if we have to cancel classes.**

**12 Month Membership Option:** I must make a down payment of \$100 at registrations/enrollment. I agree to pay my installment amount as outlined in the payment chart above, in advance, for every installment after the Start Date hereof, and each installment period thereafter through “automatic” withdrawal from an account I maintain in a financial institution pursuant to this signed authorization form or by cash or by check. Subject to change, drafts (payments) are made on or about the first (1<sup>st</sup>.) of each month/installment period. I agree to a 12 month membership term and acknowledge that the automatic withdrawals (payments) will continue for each installment period through the end date of this contract regardless of my child’s attendance and/or unless I terminate my membership as permitted in the Contract.

- One Hour Class - 12 Month Membership Monthly Payments**
- One Hour Class - 12 Month Membership Quarterly Payments**
- One Hour Class - 12 Month Membership Semi-Annual**



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**Two Hour Class – 12 Month Membership Monthly Payments**

**Two Hour Class – 12 Month Membership Quarterly Payments**

**Two Hour Class – Semi-Annual Payments**

**45 Minute Class – 12 Month Membership Monthly Payments**

**45 Minute Class – 12 Month Membership Quarterly Payments**

**45 Minute Class – 12 Month Membership Semi-Annual Payments**

**7 Month Membership Option:** I must make a down payment of \$100 at registrations/enrollment. I agree to pay my installment amount as outlined in the payment chart above, in advance, for every installment after the Start Date hereof, and each installment period thereafter through “automatic” withdrawal from an account I maintain in a financial institution pursuant to this signed authorization form or by cash or by check. Subject to change, drafts (payments) are made on or about the first (1<sup>st</sup>) of each month/installment period. I agree to a 7 month membership term and acknowledge that the automatic withdrawals (payments) will continue for each installment period through the end date of this contract regardless of my child’s attendance and/or unless I terminate my membership as permitted in the Contract.

**One Hour Class - 7 Month Membership Monthly Payments**

**One Hour Class - 7 Month Membership Semi-Annual Payments**

**Two Hour Class – 7 Month Membership Monthly Payments**

**Two Hour Class – 7 Month Membership Semi-Annual Payments**

**15 Week Membership Option (Prek, Mini Ninja and Tiny Tumbler Only):** I must make a down payment of \$100 at registration/enrollment. I agree to pay my installment amount as outlined in the payment chart above, in advance, for every installment after the Start Date hereof, and each installment period thereafter through “automatic” withdrawal from an account I maintain in a financial institution pursuant to this signed authorization form or by cash or by check. Subject to change, drafts (payments) are made on or about the first (1<sup>st</sup>) of each month/installment period. I agree to a 15 week membership term and acknowledge that the automatic withdrawals (payments) will continue for each installment period through the end date of this contract regardless of my child’s attendance and/or unless I terminate my membership as permitted in the Contract.

#### **4. CANCELLATION**

I (or my legal representative) may cancel this Contract without penalty in accordance with the following:

a. Within three (3) business days after signing this Contract and receiving a fully completed copy of this Contract. Upon such cancellation I will receive a full refund of all monies paid, including membership fees.



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b. If your child is injured and can no longer participate, we will place your account on hold. Any monies paid toward unused classes will be credit toward future classes. Installment payments will not be due until your child resumes classes.

**5. DEFAULT/REMEDIES**

Any installment payment, which is received more than five (5) days after the due date shall be subject to a late charge of \$10.00. A credit/debit card payment that is declined is subject to a \$20 charge; a returned check will result in a \$30 charge. Any payment that remains unpaid for thirty (30) days shall entitle Balance Gymnastics and Wellness to terminate the membership, to suspend some or all membership privileges, and/or to take other actions permitted by law or in equity. Closing of account, insufficient funds or any other action which prevents the automatic charge for my monthly dues, if applicable, will be a material breach of this Contract. Member agrees to pay reasonable attorney fees, legal expenses, and other lawful collection costs and expenses of collection incurred after a material breach of this Contract.

**6. MEMBER'S RESPONSIBILITY**

I acknowledge that it has been explained to me that this is a legally binding and enforceable contract and that I have agreed to maintain my membership for the period specified.

"I understand that I am responsible for all reasonable collection fees, court costs and attorney fees associated with any unpaid balances due according to this Contract." \_\_\_\_\_ Initials

We hereby agree to all terms of this Contract, intending to be legally bound hereby, and each of us has received a complete executed copy of this Contract.

Accepted by BALANCE GYMNASTICS AND WELLNESS CENTER

\_\_\_\_\_

Member's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Member's Printed Name

\_\_\_\_\_

Balance Gymnastics and Wellness Center Representative

\_\_\_\_\_

Date

\_\_\_\_\_

Balance Gymnastics and Wellness Center Representative Printed Name