

Parkettes National Gymnastics Training Center

1st Family Member

SUMMER 2009

Last Name _____ Home Phone _____
 Address _____ Email _____
 City _____ State _____ Zip _____
 Emergency Name & Phone _____ () _____
 Medical Insurance Company _____
 Policy # _____
 Mother's Name _____
 Employer _____ Position _____
 Business Phone () _____ Cell Phone () _____
 Father's Name _____
 Employer _____ Position _____

1st 3rd Family Member

*** REQUIREMENTS FOR ENROLLMENT ***
 Application form must be completed and signed by both parents. No summer membership fee. \$50.00 non-refundable deposit will be applied toward camp and/or classes. Balance due on or before first day of camp/class.
All payments are non-refundable.

CLASS CODES

Girls	Preschool
GI - Girls	YM - You and Me Kid
OG - Open Gym Time	KG - Kindergarten
	MK - Mighty K's
Specialty	Boys
CN - Cheerleaders	BO - Boys
SN - Special Needs	BD - Boys Developmental
AD - Adult	FS - Future Stars
PR - Privates	
T - Advanced Tumbling	
FZ - Flip Zone	

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

Form on reverse side must be completed by each participant. Adults participating must also complete a form. This form may be duplicated. Additional forms are available.

1st Family Member

2nd Family Member

3rd Family Member

Last Name _____	First Name _____	Last Name _____	First Name _____
Birthdate _____	Age: _____	Birthdate _____	Age: _____
Describe any medical or other problems we should be aware of: _____		Describe any medical or other problems we should be aware of: _____	
List Allergies (Reaction & Treatment): _____		List Allergies (Reaction & Treatment): _____	
Starting Date: _____		Starting Date: _____	
Class Code: _____		Class Code: _____	
Class/Camp _____		Class/Camp _____	