

RECREATIONAL GYMNASTICS

Registration Form 2016-2017

Fall Session September 6 – November 8, 2016

NAME: _____ Circle: Male or Female

BIRTHDATE: _____ AGE: _____ HEALTH CARD # _____

ADDRESS: _____ POSTAL CODE: _____

PARENT'S/GUARDIAN'S NAME(S): _____

E-MAIL ADDRESS: _____

Are you on FACEBOOK?: Circle: YES or NO

PHONE: (Home) _____ (Work) _____ (Cell) _____

In case of an emergency where parents cannot be reached, please list an emergency contact:

NAME: _____

RELATIONSHIP: _____ PHONE: _____

Any health concerns that the Club needs to be aware of: allergies, physical limitations, etc. Please list any previous injuries that may be relevant:

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PRIVACY POLICY

The collection, use, disclosure and security of your personal information is regulated by law. Gymnastics Saskatchewan and your club collects and uses your personal information to provide you with the programs, services, products and information you require as a member of your club and Gymnastics Saskatchewan. To enable Gymnastics Saskatchewan and your club to manage and develop its operations from local to international levels, your personal information may be shared with other club members, Gymnastics Saskatchewan or Gymnastics Canada and also with selected third parties who act on our behalf as agents, suppliers or service providers. Submission of your registration form and fees to your club constitutes your consent to collect, use, disclose and retain your personal information as is reasonable for these purposes.

I, _____, hereby give permission for my child, _____, to participate in their assigned level of instruction at Line 19 Gymnastics.

With my initials, I also acknowledge, accept and/or take responsibility for the following:

_____ Line 19 Gymnastics has the right to dismiss any child whose behavior is disruptive or that may be harmful to the safety and/or well-being of themselves or other students.

_____ Refunds will not be issued after the second week of class without a signed doctor's note.

_____ My child will not come to class if s/he is sick with the flu or has head lice or any other contagious or communicable disease.

_____ Images of my child can be taken by Line 19 Gymnastics for promotional purposes (ie: posters, website, newsletters, etc.)

Parent's signature: _____ Date: _____

Tuesday Classes September 6 – November 8, 2016

_____ Preschool (3 -4 yrs) *must be potty trained	\$100/session
_____ Junior (5-7 yrs)	\$100/session
_____ Beginner (8-10 yrs)	\$100/session
_____ Intermediate Class (11-12 yrs)	\$100/session

A portion of each registration fee represents the cost of your athlete's mandatory membership in GymSask (\$24) and GymCanada (\$6). These fees are remitted on your behalf to each respective organization by Line 19 Gymnastics.

Please make cheques payable to Line 19 Gymnastics.

Please email your completed form to line19gymnastics@gmail.com or fax 306-644-4981. Registration deadline is Tuesday August 23, 2016.

FOR BOARD USE:

Paid in full: _____

