

Mid-Illinois Gymnastics and Dance, Inc. ENROLLMENT FORM

WE LOOK FORWARD TO SEEING OLD FRIENDS AND NEW STUDENTS FOR GREAT GYMNASTIC AND FITNESS TRAINING! PLEASE SIGN AND DATE ENROLLMENT FORM(ONLY NEEDED ONCE A YEAR) AND RETURN WITH TUITION AND \$45 ANNUAL(EVERY 12 MONTHS) REGISTRATION FEE IF DUE. (\$35 SIBLINGS)) PLEASE MAKE CHECKS PAYABLE TO MID-ILLINOIS GYMNASTICS AND DANCE. MAY PUT SIBLINGS ON THIS SAME FORM NOTING DIFFERENCES.

PARTICIPANT NAME: _____ AGE: _____ DOB _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

PHONE: (____) _____ EMERGENCY NAME/PHONE: _____

CELL OR WORK PHONE _____

PLEASE PRINT PARENT OR GUARDIAN NAME: _____

YEARS OF GYMNASTICS/DANCE: _____ WHERE WAS TRAINING RECEIVED? _____

ANY SPECIAL MEDICAL OR OTHER PROBLEMS THAT STAFF NEEDS TO KNOW? _____

CLASSES MY CHILD WILL ATTEND (NAME OF CLASS OR CLASSES)

DAY(S), TIME(S): _____

HOW DID YOU LEARN OF OUR PROGRAM? _____

I understand that in gymnastics and dance, as in any sport that involves activity, there is a possibility of injury. An injury may be a bruise or a broken bone or a permanent disability(possibly paralysis) or even death. We are very concerned with safety in the gym and stress progression in skills, proper matting and equipment. I hereby consent to allowing my child/ward or children(named above) to participate fully in the programs of Mid-Illinois Gymnastics and Dance, Inc. It is hereby agreed that I, my child or children adopted or otherwise, my executors, waive and release all rights and claims for damages that I may have at any time against Mid-Illinois Gymnastics and Dance, Inc. including all of its directors, officers and employees whether paid or volunteer for any injury or damages in connection with the gymnastics/dance activities and programs. The risks involved in respect to such a program are fully understood. I confirm that the person(s) named above is(are) in good health and authorize simple first aid and also emergency treatment if deemed necessary and I cannot be reached.

Signature of Parent or Legal Guardian

Date

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