

# REGISTRATION FORM (Please Print) (WINTER - YOGA / FITNESS)

## Personal Information

Student's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Birthdate (MONTH, DAY, YEAR) \_\_\_\_\_ Sex (F, M) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

(     )  
Phone \_\_\_\_\_ Emergency # \_\_\_\_\_

E - mail \_\_\_\_\_

## Your experience:

\_\_\_\_\_

Do you have any medical issues that may affect your participation in this class? If so, please provide details.

\_\_\_\_\_

## Number of Passes Requested \* (check one)

| Class Time | 1 Class                       | 7 Classes                     | 12 Classes                    |
|------------|-------------------------------|-------------------------------|-------------------------------|
| 1 Hour     | <input type="checkbox"/> \$10 | <input type="checkbox"/> \$59 | <input type="checkbox"/> \$95 |
| 1/2 Hour   | <input type="checkbox"/> \$5  | <input type="checkbox"/> \$29 | <input type="checkbox"/> \$48 |

\* A complimentary class will be provided for NEW members.

**Cost of Program** Class Fee \$ \_\_\_\_\_

Paid by: \_\_\_\_\_

Cash     Interac     Visa / MC     \_\_\_\_\_  
Other

## We'd like to know how you heard of us ...

Newspaper     Radio     Word of Mouth     Other

**Amateur athletic waiver:** In consideration of being allowed to participate at STARS Fitness & Gymnastics with regards to athletic/sports program, related events and activities, the undersigned individual acknowledges, appreciates, and agrees that:

- As in any sport the possibility of injury exists, and where particular rules, equipment, and personal discipline may reduce the risk, the risk of injury does exist.
- I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual, significant hazard during my presence or participation, I will remove myself from the participation and bring such to the attention of the nearest official immediately.

**Publicity:** STARS Fitness & Gymnastics periodically uses photos of gymnasts for its ads, web page or other forms of publicity. I give approval for such photos of the gymnast registered above to be used in this manner.

Signature of Parent / Legal Guardian or participant if 18 or older \_\_\_\_\_ Date \_\_\_\_\_