



REGISTRATION FORM 2014-2015

How did you hear about us? _____

Parent 1 _____ Cell # _____ Work # _____

Parent 2 _____ Cell # _____ Work # _____

Mailing Address _____

Active Email Address _____ Home Phone _____

Student 1 _____ Birthdate ___/___/___ Age _____
Class Selection(s) _____ Clothing Size _____

Student 2 _____ Birthdate ___/___/___ Age _____
Class Selection(s) _____ Clothing Size _____

Student 3 _____ Birthdate ___/___/___ Age _____
Class Selection(s) _____ Clothing Size _____

Medical conditions/allergies _____

Emergency Contact _____ Phone _____

TOTAL TRIMESTER TUITION _____

(Note: trimester tuition is due 3 times per year)

- CHECK
CASH

I have received, read and understood all school policies and rules. I acknowledge that participation at Sporty Princess, Inc. involves physical activity and certify to Sporty Princess Rhythmic Gymnastics School and its directors and employees that the participant is physically fit for this activity and that he/she has not been advised by any medical professional that such participation should be avoided or limited. I acknowledge that although utmost care is taken to avoid injury, this activity carries the potential for injury and hereby release Sporty Princess, Inc. and its directors and employees of any liability for injuries incurred under any circumstances. I give permission for any photo or video taken of my child in class or performing to be posted on the website and/or to be used for studio publications or television.

PARENT or GUARDIAN SIGNATURE _____ Date ___/___/___