



Ajax Acro's Gymnastics Club & Durham Gymnastics Academy

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Recreational Registration Form 2011-2012

Class: _____ Day: _____ Time: _____

Participant Information (Please print):

Last Name: _____ First Name: _____

Address: _____ City: _____ Phone number: _____

Postal Code: _____ Date of Birth (mm/dd/yyyy): _____

Gender: Male Female New member: Yes No

Health Conditions / Allergies or Special Notes:

Parent/Guardian Information (Please print):

Last Name: _____ First Name: _____

Business Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact name: _____ Emergency Contact Phone: _____

How did you hear about us? _____

"Children's Fitness Tax Credit" – every session a receipt will be distributed to claim on your taxes.
(Write the parent name you would like the receipt to be made out to- i.e. whoever will claim it on their taxes)

Name: _____

Would you like to receive it by email? Yes No

(The receipt will be sent to the email that you listed above. Please ensure that **our email address** is not labelled as junk mail.)

Payment Information (Please print):

Cheque: _____ Cash: _____ Debit (during office hours): _____ Credit (VISA/MasterCard)

Card #: _____ Expiry: _____

Validation Code (3 digits on the back of the card): _____ Name on the card: _____

Notes on gym policies:

- Street shoes must be removed and left in the front lobby before entering the gym.
- Long hair must be tied back; all jewellery must be removed with the exception of studded earrings.
- Food and drinks are not allowed in the gym or change rooms.
- Only participants and staff may enter the gym; viewing areas are provided for spectators.
- Gymnastics equipment may not be used unless under coaches supervision.
- Annual Gymnastics Ontario/administration fee for recreational classes \$30.00/student/year is non-refundable.
- Non-refundable cancellation fee \$15.00.
- NSF chq charge \$25.00.
- No make up classes.
- No refunds after the completion of the 2nd class.

Waiver: By signing this form I acknowledge that I am aware that there are risks associated with the sports of gymnastics and trampoline. I understand that the Ajax Acro's Gymnastics Club and Durham Gymnastics Academy has tried to create a safe and controlled environment and that there are rules that must be adhered to by all participants. I waive the rights of the participant to damages or other costs in the event injury is caused due to participation in gymnastics or trampoline.

SIGNATURE OF PARENT/LEGAL GUARDIAN

DATE