SUMMER CAMP PROGRAM

Student Information Registration



Corinth Gymnastics, Inc. 1402 N. Corinth, Suite 106

1402 N. Corinth, Suite 106 Corinth, Texas 76208 940-498-4FUN (4386)

Student's Information:

Last Name	····	First Name	
Address:	 	Date of Birth:	
	Zip		
Parent/Guardian #1:			Parent/Guardian #2:
Name:		Name:	
Employer:		Employer:	
Business Phone:		Business Phone:	
Cell Phone:		Cell Phone:	
e-mail Address:		e-mail Address:	
Person responsible for paym	ent:	Relationship:	<u>.</u>
Driver's License #:	State:		
Comments:			<u>.</u>
How did you hear			guardians cannot be contacted:
about us?		Relationship	
	Phone.	Phone Alternate Phone	
	Name.	Relationship	
		Alternate Phone	
	Doctor's Name	Phone	
			Policy #
	Allergies/Important medical information.		

OFFICE USE ONLY: Reg. Pd [] Policies [] Waiver []	
Processed By	
,	_

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INDIVIDUALS AUTHORIZED FOR CHILD PICK-UP:

Primary: Last Name	First Name	
Address:	 Phone:	
Cell Phone:		
Last Name	First Name	
Address:	Phone:	
Cell Phone:		
Secondary: Last Name	First Name	
Address:	Phone:	
Cell Phone:		
Last Name	First Name	
Address:	Phone:	
Cell Phone:		
Last Name	First Name	
Address:	Phone:	
Cell Phone:		

EMERGENCY "CODE WORD"

If a staff member receives a call requesting a change to the authorized pick-up list above, the caller will be required to give the Code Word as the means of identity verification.

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SUMMER FUN ACTIVITIES

- Free Play The children will have free play time in our large gym. This is NOT gymnastics instruction. It is supervised free time structured more as an indoor recess.
- Field trips Activities away from the gym include activities such as Movies, Swimming, Park, Bowling, Roller Skating, etc.
- Other Activities These will include puzzles, board games, cards, and appropriately rated movies & videos.

*** Parents please note that if you prefer that your child not participate in any specific activity listed above, please

indicate your preference on the Student Information sheet.

ACTIVITIES WAIVER AND RELEASE

- I am fully aware and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death, as well as other damages and losses associated with participation in gymnastics activities.
- I hereby give my consent to Corinth Gymnastics, Inc. to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation, and emergency medical services as warranted.
- I further agree that Corinth Gymnastics, Inc. along with the employees, officers, and directors of this
 organization shall not be liable for any losses, damages, or injuries occurring as a result of my child's
 participation in the program, including but not limited to damage claims for personal injury or death,
 except where such loss or damage is the result of the intentional injury by an employee of Corinth
 Gymnastics, Inc.
- I also affirm that I now have and will continue to provide proper hospitalization, health, and accident
 insurance coverage, which I consider adequate for both my child's protection and my own protection.
 I also understand that it is the parents' responsibility to warn the child about the dangers of
 gymnastics and injury. The parent should warn the child according to what the parent feels is
 appropriate.
- As legal parent or guardian of this athlete, I hereby verify by my signature below that I fully
 understand and accept the above conditions for permitting my child to participate in the SUMMER
 FUN Program activities conducted by Corinth Gymnastics, Inc.

· ·	icted by Committ Cymnastics, mc.	
By signing below, you acknowledged SUMMER FUN Rules, Policies and V	ge that you have received, read, and Vaiver.	agree to abide by the
Printed name of Parent/Guardian	Signature of Parent/Guardian	Date