

Smart Cookie Club



STAY. PLAY. LEARN.

Membership Application

Child's Name:	
Child's Date of Birth:	
<input type="checkbox"/> Parent <input type="checkbox"/> Caregiver 1:	
<input type="checkbox"/> Parent <input type="checkbox"/> Caregiver 2:	
Phone 1:	<input type="checkbox"/> Preferred method of contact
Phone 2:	<input type="checkbox"/> Preferred method of contact
E-mail:	<input type="checkbox"/> Preferred method of contact
Address:	
Location and Semester of Inquiry:	
Allergies:	
Special Requests/Needs:	
How did you hear about us? <input type="checkbox"/> Facebook <input type="checkbox"/> Twitter <input type="checkbox"/> Friends <input type="checkbox"/> Other _____	
Smart Cookie Club is going green! You will receive your weekly newsletter by e-mail unless otherwise indicated. Thank you for helping us make a difference!	
By printing and signing below I hereby acknowledge and declare that I have read, understood and agree to all club rules, including policies and terms and conditions. By participating in Smart Cookie Club classes and/or using any Smart Cookie Club equipment or facilities, I agree that I am participating voluntarily and do so at my own risk and I agree to fully release the Smart Cookie Club and its owners, directors, agents, staff, instructors and volunteers from all claims or lawsuits for any injuries, death, property damage or theft, losses, or any other liability of any kind, arising directly or indirectly out of my own, or my child's participation in the Smart Cookie Club and/or use of any Smart Cookie Club equipment or facilities. I consent to the use by Smart Cookie Club of the Participant's likeness (photographs & video) for promotional purposes.	
Date:	
Print Name:	
Signature:	