REGISTRATION FORM

Name:		Grade:				
Program:	WINTER 2017-18 OPEN GYM	Fee:				
	FAMILY PASS \$15.00 -INVIDUAL PASS \$6.00 -1x PA	<mark>ISS \$</mark> .	2.00			
Address:		Ck#				
Phone:		Cash				
Email:						
Complete & Return with Payment to Register						
The following MUST be signed by all class participants age 18 and older, or by a parent or guardian of any particpant under the age of 18.						
I CERTIFY THAT MY DEPENDENT LISTED ABOVE (Check one)						
IS ADEQUATELY INSURED or DOES NOT HAVE INSURANCE, BUT I ASSUME ALL LEGAL RESPONSIBILITIES FOR INJURIES/ACCIDENTS.						

Signature:	Date:

If family pass is being purchased please list members names & ages here:

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