

Broderick Gymnastics 2016-2017 School Year Registration

67 Sprague St. Hyde Park
617-361-7300

www.broderickgym.com

90 Providence Hwy, East Walpole
508-668-6600

Name of Child _____ Male _____ Female _____

Age (at time of registration) _____ Date of Birth _____ Grade in school _____

Address _____ Town _____ Zip _____

Main phone # _____ Email _____

Parent/Guardian Name _____ Relationship to student _____

Cell # _____ Other # _____

Other Parent/Guardian _____ Relationship to student _____

Cell # _____ Other # _____

Emergency Contact _____ Relationship to student _____

Cell # _____ Other # _____

Please list additional enrolled siblings _____

Is the student a former member Y N If yes, please list the approximate start date _____

How did you hear about us? _____

Does your child have any known allergies? Y N

If yes, please explain _____

Is your child taking any medications we should be aware of? Y N

If yes, please explain _____

Does your child have any physical, medical, or mental limitations we should be aware of? Y N

If yes, please explain _____

Does your child suffer from asthma? Y N

Please list any additional concerns you may have _____

May we use your child's photo in our promotional items including our facebook page and website? Y N

If yes, please sign here _____

(parent/guardian signature)

(date)

Broderick Gymnastics Academy

www.broderickgym.com

Child's name _____

Class Selection

Please list your top 2 day and time preferences. We will do our best to accommodate you.

Class Name/Type _____

Choice #1 Day _____ Time _____

Choice #2 Day _____ Time _____

The Broderick Gymnastic Academy, Inc. staff recognizes our obligation to make our students and their parents aware of the risks and hazards associated with the sport of gymnastics, trampoline, tumbling, cheerleading, and dance. Students may suffer injuries, possibly minor, serious, or catastrophic in nature. Gymnastics, trampoline, tumbling, cheerleading, and dance can be dangerous and can lead to injury.

Release for Participation

I, _____ understand that the activities conducted at Broderick Gymnastic Academy, Inc. can have inherent risks. I hereby agree that neither Broderick Gymnastic Academy, Inc., nor its owners, agents, employees, officers, or directors shall be liable for any injuries, damages or loss sustained by my child _____, which are in any way related to my child's participation in gymnastics, tumbling, trampoline, cheerleading, dance, birthday parties, and special events. I hereby testify as to my child's sound health of mind and body and I authorize Broderick Gymnastic Academy, Inc. to seek medical treatment at the nearest medical facility in the event of an emergency.

(Parent/Guardian Signature)

(Date)

Payment

A non-refundable registration fee of \$30/single member or \$45/family is due upon enrollment. This registration fee is valid from September 1, 2016 through August 31st, 2017.

----- For Office Use Only -----

Class fee \$ _____ + \$ _____ (registration fee) = _____ (total)

Amount paid _____ Type of Payment _____ Date _____ Initials _____