Gymnastics Enrolment Form 2019

Please fill out form below (one per child) and return to reception, along with your direct debit form.

Name of Gymnast

Current Year

Name of Parent

Contact Email

Contact Phone

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| --- | --- |
| Session Requested: | * Monday girls, 3:30pm – 5:00pm
* Monday boys, 3:30- 5:00pm
* Tuesday girls, 2:30pm – 4:00pm
 |
| Previous Experience: | * Yes
 |
|  | * Yes (please assess for Competition Squad)
* No
 |

I have read the Gymnastics Program Information for 2019 and agree to the conditions of my child being part of the Gymnastics Program. I accept the financial scope and agree to the fees being processed on the third of Friday of each term and understand that this will happen through my existing direct debit arrangement, unless alternative arrangements have been made.

Parent/Guardian Name Parent/Guardian Signature Date