



## Registration

**Please Print:** Student's Name \_\_\_\_\_ D.O.B. \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent's E-mail \_\_\_\_\_ Cell Phone \_\_\_\_\_

Does your child have any limiting medical conditions? \_\_\_\_\_

Emergency Contact \_\_\_\_\_

### Class Choice and Payment Information

Circle one please: **Kidnastics**      **Lacrosse Boys**      **Lacrosse Girls**      Strength and Agility

Class Name \_\_\_\_\_ Age \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

Contract date \_\_\_\_\_ Session \_\_\_\_\_  Cash  Check # \_\_\_\_\_

AMEX    M/C    VISA    DISCOVER   Approval number \_\_\_\_\_

Insurance/Registration fee (Kidnastics classes only) \$ \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_

### WAIVER FOR PARTICIPATION-PLEASE READ THIS FORM CAREFULLY

As a participant, or parent/guardian of the participant in sport classes and activities I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss which I or my child may sustain as a result of participating in any and all activities connected with or associated with the program. I agree to waive and relinquish all claims I or my child may have against Turf Island Inc. and the staff as a result of participation in the program. I further agree and declare that the participant has been examined by a physician and is physically fit and able to participate. I authorize Turf Island to request medical treatment as necessary to insure the well-being of my child at my expense. **I have read and fully understand the above details and hereby waive and agree to release all claims.**

**Payment /Refund Policy:** Full Payment is due at the time of registration. Registrations sent without payment will not be enrolled until payment is received. I accept that payment is for the full session and no credit will be given for withdrawals or absences after the session begins. Carry over classes from one session to the next is not allowed. Turf Island reserves the right to cancel this contract at any time at its sole discretion and management's sole liability shall be to refund any amounts paid on a pro-rata basis. Refunds will be given only in case of medical emergency and requests must accompanied by a note from a doctor. Refunds will be issued in credit form only. Credit may be applied to future birthday parties or classes. Checks are to be made to Turf Island. All returned checks will be subject to a **\$35 fee**. Turf Island reserves the right to remove any child from a class that may be inappropriate for that child or for that class. Turf Island retains the right to any photographs or video taken at the facility to be used for publicity or advertising. **I have read and fully understand Turf Island's payment/refund/photograph policy.**

