

CHAMPION ELITE 2014-2015 REGISTRATION FORM



- Tumbling** **Dance**
 Fundamentals **Rec Cheer**
 Strength and Conditioning

FOR OFFICE USE ONLY

Class Fee \$ _____ Reg. Fee \$ _____

Method of Payment

Check # _____ CASH Credit/Debit

Trial date: _____

Participant Information

Participant Name _____ Gender **M** **F** Date of Birth _____
Address _____
City, State, Zip _____
Email (if applicable) _____ Cell # _____

Parent/Legal Guardian Information

Parent/Guardian Name _____ Contact # _____
Relationship _____ Email _____
Parent/Guardian Name _____ Contact # _____
Relationship _____ Email _____
Emergency Contact _____ Contact # _____
Relationship _____ Email _____

Medical Information

Primary Care Physician _____ Telephone Number _____
Insurance Carrier _____ Policy Number _____
Allergies _____
List all previous injuries and/or physical limitation(s): _____
List all current medications: _____

Authorization

Video and Photography Release: I understand that my child's photograph/video may be taken during the course of class instruction or during a special event. I hereby grant my permission for the resulting video and /or photograph to be used for any and all publicity and printing purposes

Notice of Termination: I understand that Champion Elite requires notice by the 15th of the month prior to terminating a monthly class. One class attended for any month constitutes ownership of that class spot for the entire month.

I understand that in any activity the potential exists for injury, minimal to catastrophic. Champion Elite, its employees, agents, officers and directors shall not be responsible for losses and damage associated with participation in any activity, exhibition, competition, recital or clinic or travel to or from any event in which the above named is involved. I hereby release Champion Elite, LLC staff to render first aid in the event of any injury or illness, to seek medical assistance if deemed necessary and to transport to a medical facility or to call an ambulance.

Parent Signature

Date