

## Registration Form

### Gymnastics

Gymnastics class is held on

**Tuesday 11:35 am – 12:20 pm**

Child's Name: \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parents/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Work/Cell: \_\_\_\_\_ Father's Work/Cell: \_\_\_\_\_

Medical Conditions/Food Allergies: \_\_\_\_\_

Siblings Names and Ages: \_\_\_\_\_

Additional Contact/Carpooling with: \_\_\_\_\_

What aspects of your child's experience are most important to you? \_\_\_\_\_

\_\_\_\_\_

Please contact My Smart World Learning Center to obtain tuition information.

Phone: (801) 796-0599  
 E-mail: info@mysmartworld.com

I hereby enroll my child \_\_\_\_\_ in My Smart World Learning Center Gymnastics classes for the school year August 20\_\_ through May 20\_\_. I understand that paid fees are not refundable. I give permission for my child to participate in school activities and will not hold MSW responsible for any injuries or accidents that may occur during the class hours. I authorize MSW to photograph my child and to use such photographs on MSW Blog and classroom use only. I agree to pay tuition by the fifth of every month or I will be assessed a \$10 late fee. I understand that missed days of school will not be credited.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_