



## PTA BOXFIT Academy Registration Form 2021



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<b>Junior's Details*</b>	<b>Gender</b>	<b>Last Name:</b>	<b>First Name(s):</b>
<b>Nationality*</b>			
<b>Father's Details*</b>	<b>Title:</b>	<b>Last Name:</b>	<b>First Name:</b>
<b>Mother's Details*</b>	<b>Title:</b>	<b>Last Name:</b>	<b>First Name:</b>
<b>Father's Mobile*</b>			<b>Mother's Mobile*</b>
<b>Junior's Mobile</b>	<b>Contact in case of Emergency</b>		
<b>Email 1*</b>			
<b>Junior's Date of Birth*</b>	<b>Day</b>	<b>Month</b>	<b>Year</b>
<b>Preferred Days (Monday to Friday)</b>			

### Declaration:

I,.....(Name) hereby confirm, that I, as the representative and legal guardian of the above mentioned PTA BOXFIT academy attendant, as well as the attendee will be bound to adhere to the rules and regulations of PTA BOXFIT academy. In case of miss-conduct during the program, PTA BOXFIT has the right to suspend a junior after discussing it with the guardian. I further confirm that I will not hold PTA BOXFIT, and/or the Management and/or the coaches responsible for any loss, damage and/or injuries suffered directly or indirectly by me or son/daughter during or as a result of the lesson unless such loss, damage and/or injury was caused and/or contributed to by the negligence of PTA BOXFIT and/or the Management and/or the coaches.

All attendees and guardians are to adhere to the [Ministry of Health and Prevention \(MoHaP\)](#) and [National Emergency Crisis and Disasters Management Authority \(NCEMA\)](#) protocols for regulating and containing the spread of COVID-19.

Please note that fees are paid at the beginning of each Academy session purchase (10 x sessions) or within the first week of a repeated session purchase unless paying for individual lessons.

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact.

Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Signature Junior

Signature Guardian

Form received by