

CHILDREN'S ATHLETIC TRAINING SCHOOL 188 Maple Avenue, Rockville Centre, NY 11570 Phone 516-763-1299

For office use only

LEVEL: _____

CODE: _____

Amt. Paid: _____

PLEASE FILL OUT ALL INFORMATION BELOW

PLEAS	E FILL OUT ALL INFO	IRIVIA I ION BI	ELOW		Method:	
Child's Full Name:		Δαe·	Date of Birth:	1 1	Bal. Due:	
Child's Name to be put on TEE SHIRT:			Boy [] Girl	_''	Credit due:	
·						
Street Address:	Town:		Zip Code			
Home Phone: ()	Cell Phone: () _				ard, Visa or Disc	over_
EMAIL ADDRESS (PLEASE WRITE CLEARL	Y):			ONLY CC#		
Parent's Name:	_ Phone: ()			CC Expir	ation	
Parent's Name:	_ Phone: ()				rity code : Charge full pric	e
I am enrolling for CLASS:	_ DAY:		TIME:		nt Plan \$30 a nt Plan \$40 a	
School now attending:	Dismi	issal time:				
Cough gets worse, difficulty or trouble breat excessive fatigue, new or severe headache, How did you hear about CATS? I am the parent/guardian of	multi sports program incetic Training School, Incerior to and after his/her him/herself or others. Esses must be arranged at An additional make-up of to any photographs take distration and that the Classes) or \$25.00 (10 week ceived at least 24 hour will be given if notificated in the control of the contr	and I concluding but not concluding but not concluding but not concluding but not conclude at least one dat least one dat least will be given at CATS to hildren's Athles at conclusion is received at least one datas will be given at CATS to hildren's Athles at least one to the conclusion is received at least one of the conclu	ertify that my child has not the limited to strains, sprain instructors liable for any see. CATS reserves the rights are not eligible for any in advance, in the same ven if your class falls on the used for publicity or adtic Training School, Inc. of the limits or second class or the limits or the li	s and broken injury sustained to expel an refund. e level class, a a day CATS is vertising. reserves the riterefundable for CATS sesser the second CEPTIONS.	tions that prohibit of bones when using ed as a result of y student whose be apply only to the color all classes. Sion not to incur to class of the enro	or limit the ehavior current ss due he fee lled
TRANSFERS: RETURNED CHECKS incur a Solution in the guardian can be case of accident/injury and the guardian can be understand that CATS, Inc. retains the right to	not be reached, I grant (obtain medical atte	ntion.
CATS is in a public facility and cannot be held r By signing below, I certify that I have read a in order for the enrolled child to attend class Signature:	nd understand this do s. This form must be s	ocument and igned in orde	er that enrolled child ma	ay attend clas		