



REGISTRATION FOR:
CLASS AT GYMSTAR!

Please complete the FORM below and return--with the \$30 annual registration fee* to :

Gymstar Gymnastics 3762 Shelburne Road, Suite 9, Shelburne, VT 05482

*Please note: the annual registration fee is for **one** academic year: *September through June.*

Phone: (802)985-8948 Email: gymstarshelburne@gmail.com GymstarGymnastics.com

Name Of Child: _____ Age: _____

Address: _____

Parent/Guardian: _____ Phone: _____

Parent/Guardian: _____ Phone: _____

Email(s): _____

CLASS: _____

CLASS DAY: _____

CLASS TIME: _____

Payment Amount Enclosed: (Please Check One)

() \$30 Annual Fee/Deposit OR () \$ Full Payment

My child is fit to participate in vigorous activities and I understand there are risks of physical injury inherent in participation in gymnastics and recreation activities. I hereby release Gymstar Gymnastics, Inc. and its employees for any liability for personal injuries.

Signature of Parent or Guardian

Date

(Printed Name)