

- DROP IN (\$13 / Class)
- AUTO DRAFT (\$36)
- MONTHLY (\$36)
- REGISTRATION (\$15)

# **TumbleBus Registration Form**

**SEPTEMBER 2011 - AUGUST 2012**

FOR OFFICE USE ONLY!

Code: \_\_\_\_\_

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

**Parent/Guardian:** \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Student 1:** \_\_\_\_\_ Age: \_\_\_\_\_ M/F: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_

Special Medical Conditions or Allergies? Y/N If yes, please explain: \_\_\_\_\_

**Student 2:** \_\_\_\_\_ Age: \_\_\_\_\_ M/F: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_

Special Medical Conditions or Allergies? Y/N If yes, please explain: \_\_\_\_\_

## **LIABILITY WAIVER**

It is understood that the participation in sports activities at Tumblebees Ultimate Gym (TUG) may involve the risk of serious injury or death. I expressly agree that all such activities and/or the use of any TUG facilities or activity is undertaken at participant's own risk. I represent that my child listed above is able to undertake the enrolled activities provided by TUG. I hereby, forever RELEASE, waive, and discharge TUG, its affiliates, officers, directors, servants, agents, and employees on behalf of myself, participant's self, heirs, executors, administrators, and personal representatives from any and all claims, demands, injuries, actions, active or passive negligence or other causes or actions whatsoever arising out of or connected with the use of any of the services/activities or facilities provided by TUG. TUG shall not be liable for any such claims.

**I HAVE RECEIVED MY TUMBLEBUS INFORMATION BROCHURE AND READ THE LIABILITY WAIVER**

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

I give permission for my child's photo to be used for promotional purposes and/or the website. No child's name will be used.