



REGISTRATION FORM

(281-412-3350) (info@reflexpga.com)

STUDENT INFORMATION

Name: _____ Gender: F/M Age: ____ DOB ____/____/____

Address: _____ City _____ State _____ Zip _____

Home Phone # _____ E-Mail _____

School _____ Grade _____

PARENT INFORMATION

Mother's Name _____ Employer _____

Work # _____ Cell # _____

Father's Name _____ Employer _____

Work # _____ Cell # _____

MEDICAL & EMERGENCY INFORMATION

Are there any medical conditions, mental or physical disabilities? Explain: _____

Allergies _____ Medications _____

Insurance Company _____

Doctor _____ Phone _____

Emergency Contact _____ Cell # _____

RELEASE TO PICK UP

A representative of the REFLEX kids Afterschool Program is authorized to transport my child on any or all of the days I have circled here:

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY
(circle all days that apply)

Parent/Guardian Signature _____

School Name _____

Grade _____ Homeroom Teacher _____

Date _____

MEDICAL RELEASE & LIABILITY WAIVER

Participant Name _____

With knowledge of the risk of possible injury, disability or death from participation in gymnastics, tumbling and/or cheerleading, I/the parent/legal guardian of the "student" mentioned above grant permission for the "student" to participate in gymnastics, tumbling, cheerleading or any event being held at REFLEX the Pearland Gymnastics Academy. I hereby give my consent to REFLEX supervisors and employees for any medical treatment needed for "student" when I cannot be contacted and in the judgment of any prospective treating doctor, is immediately and medically necessary to treat any injury sustained by the "student".

By granting permission for "student" to participate I release REFLEX the Pearland Gymnastics Academy., its supervisors and employees from any and all liabilities that may arise due to any injury including death to "student" by reason of "student's participation in any activity at REFLEX the Pearland Gymnastics Academy. or in which REFLEX the Pearland Gymnastics Academy. is participating elsewhere.

I have read, understand & execute this release & acknowledgement:

Signature: _____ Date _____