

# TUMBLEKICKS (REGISTRATION FORM) 2011

## Please fill out the following personal information:

Student's Name \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_  
Address \_\_\_\_\_ Home E-mail: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home phone \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Cell or work # \_\_\_\_\_  
Father's Name \_\_\_\_\_ Cell or work# \_\_\_\_\_

### **INHERENT RISKS:**

I, \_\_\_\_\_ understand and accept the risks of injury inherent to this activity. I hold Tumblekicks, and their independent contractors free from all harm in the case of any injury to the above-named child. I further understand that all reasonable care shall be given to prevent undo harm to my child.

Please list any medical condition/allergies we might need to be aware of:

Parent's signature \_\_\_\_\_

### **Westminster Family Center (please circle the day/time you want for your child)**

<b>Monday:</b>		<b>Tuesday</b>	
9:30-10:15	Just Me	9:30-10:15	Caregiver/Me
10:30-11:15	Caregiver/me	10:30-11:15	Just Me
<b>Wednesday:</b>		<b>Thursday:</b>	
9:30-10:15	Just Me	9:30-10:15	Just Me
10:30-11:15	Just Me	10:30-11:15	Just Me

### **Monday-Thursday sessions:**

**Please put a check by the session you are signing up for.**

Winter I (Jan. 03-Feb. 24): **8 weeks:** \_\_\_\_\_

Spring I (Feb. 28--Apr. 21): **8 weeks:** \_\_\_\_\_

Mini (May 02-June 9): **6 weeks:** \_\_\_\_\_

### **CLASS FEES:** (per session)

<b>45 min. class</b>	<b>8 wks</b>	<b>6 wks</b>
Member of the WFC	\$50	\$38
Non-member of the WFC	\$55	\$42

**Guest fee/sibling fee: \$6/class. Please R.S.V.P. /spot.**

**Please review all policies listed on your Tumblekicks Information Sheet.**

**Enrollment is limited to 10 children per class.**

**Registration for the Winter I session going on NOW! Payments are due with this form to secure a spot.**

### **Questions or concerns?**

Call: Shareen Scibek  
410-374-0180  
Cell: 443-340-6413  
or  
E-mail:  
sscibek@comcast.net

### **Please make check/money order to:**

Shareen Scibek  
3997 Terrace Dr.  
Hampstead, MD  
21074

### **REFUND POLICY**

**\*\*Withdrawal before session begins-full refund\*\***  
**\*\*No refunds after the first class, unless class in cancelled\*\***  
**\*\*Refunds/credits will not be given for missed classes\*\***  
**\*\*Children can make-up 1 class during the session\*\***