

**Term 3 2018 WINTER PHENOM CLASS REGISTRATION FORM**

GYMNAST NAME \_\_\_\_\_ Age \_\_\_\_\_ Bday: \_\_\_\_\_

1<sup>st</sup> Class choice (day & time) \_\_\_\_\_

2<sup>nd</sup> Class choice (day & time) \_\_\_\_\_

Amount due: \_\_\_\_\_

If you prefer to pay by credit card, please include the following information:

Name as it appear on card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_

3 Digit Security Code: \_\_\_\_\_ Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Authorization Signature: \_\_\_\_\_

Upon payment & this registration form, you will be officially registered in the class of your 1<sup>st</sup> choice, unless we notify that it was not available.

**\*If you are new to Phenom Gymnastics, you must also read, sign, and submit the Phenom Waiver form & annual registration fee of \$50/family/year.**



