



Please complete the FORM below and return--with the \$35 annual registration fee\* to:

Chalk It Up Gymnastics 524 E Washington St. Chagrin Falls, OH 44022

\*Please note: the annual registration fee is for one academic year.

Phone: (440)417-2835 Email: [chalkitupgymnastics@yahoo.com](mailto:chalkitupgymnastics@yahoo.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)

\$35 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/Guardian\_\_\_\_\_