

GymStars Registration Card

Child Information:

Last Name: _____ First Name: _____

Boy Girl Birthdate: _____ Age: _____

Class Day and Time: _____

Parent Information:

Mother's Name: _____ Father's Name: _____

Cell Phone #: _____ Cell Phone #: _____

Email Address: _____ Email Address: _____

Home Address: _____

Emergency Contact Information:

Name/Relation: _____

Phone #: _____

GymStars Registration Card

Child Information:

Last Name: _____ First Name: _____

Boy Girl Birthdate: _____ Age: _____

Class Day and Time: _____

Parent Information:

Mother's Name: _____ Father's Name: _____

Cell Phone #: _____ Cell Phone #: _____

Email Address: _____ Email Address: _____

Home Address: _____

Emergency Contact Information:

Name/Relation: _____

Phone #: _____