

SPORTS SCHOOL "JUNAK"

2017/2018 REGISTRATION FORM - TORONTO

Sportska Skola Junak

▪ www.SportskaSkolaJunak.com ▪ junak@cogeco.ca ▪ www.facebook.com/SportskaSkolaJunak ▪ tel.905 582-1151

Athlete's Info

Last Name: _____ First Name: _____ Gender: M F
 Birthdate: day: _____ / month: _____ / year: _____ Athlete's Age: _____ T shirt size Youth: S M L XL

Parent's Info

1. Parent/Guardian First and Last Name: _____ E-mail _____
 2. Parent/Guardian First and Last Name: _____ E-mail _____
 Address: _____ City _____ Province: _____ Postal Code: _____
 Home Ph. # _____ Work# _____ Cell# _____ Cell# _____
 Emergency contact (during program hours) Name & Relationship: _____
 Home Phone # _____ Work# _____ Cell# _____

Health Info

Does your child have any medical problems? No Yes

If Yes, please explain _____

Does your child have any allergies? No Yes

If Yes, please explain _____

Program Fee

SPORTS SCHOOL JUNAK Membership Payment Schedule for 2017/2018 ST. Gregory CS, 122 Rathburne Rd. TORONTO, Kipling/Ratburne - Wednesdays 18:15-19:30H and/or 19:45-21:15H						
	ATHLETES 6-8 or Grade 1-3 REGULAR PROGRAM I Trimester JUNAK+GYMNASTICS- Wed./Fri II and III Trimester JUNAK - Wednesday	ATHLETES 9-12y or Grade 4-7 REGULAR PROGRAM I, II and III Trimester JUNAK- Wednesday		Official Use Only		
3 Postdated Cheques Dated	REGULAR PROGRAM	REGULAR PROGRAM	OPTIONAL PROGRAM	Date	Amount	#Cheque E-TR, Cash
SEPTEMBER 20, 2017	\$680.00	\$370.00	\$680.00		\$	#
DECEMBER 06, 2017	\$370.00	\$370.00	\$370.00		\$	#
MARCH 07, 2018	\$370.00	\$370.00	\$370.00		\$	#
Deposit					\$	#
TOTAL	\$1420.00	\$1110.00	\$1420.00	TOTAL	\$	
OR ONE PAYMENT						
SEPTEMBER 20, 2017	\$1390.00	\$1090.00	\$1390.00		\$	#

HST Included in price

Method of payment: Cash, Cheque, E-transfer - ask for password

Please make cheques payable to: Sports School JUNAK

All fees are non-refundable

***10% discount for the second child

Photo release

Yes, I give permission to Sports School Junak to include my child in photos taken by program staff, and/or occasional DVD taken by local media.

I understand these photos may be used for promotional purposes (e.g. slide show, website photo gallery, brochures, camp fair display, etc), but no names will be used.

** If you **do not** wish your child to be included in any photos, please print "Photos Prohibited" here: [_____] and check here _____ to indicate that your child is fully aware that he/she must exclude themselves from any/all individual/group photos.

There is a risk of injury involved in training and participation in any sport. Sports School "Junak" will make every effort to create safe and controlled environment. In an unlikely event that an injury to my child occurs arising from participation in the program activities, I hereby release all employees, instructors and Director from any and all claims. I give program officials the right to act on my behalf in case of an emergency.

Parent's Name - Please print

Parent's Signature

Date: _____