



871 Seven Oaks Blvd., Suite 210
Smyrna, TN 37167
cmegym@aol.com

Swim Registration Form 2011

Please print and complete this form. Mail, along with the enrollment fee to:

**Creative Me! Gymnastics
871 Seven Oaks Blvd., Suite 210
Smyrna, TN 37167**

Student Name _____

Age _____ Date of birth _____ Sex ____M ____F

Session Request _____ Class Time _____ Class Level _____

Parents' Name _____

Address _____ Zip _____

Email address _____

Phone #: Mom _____ Dad _____ Emergency _____

Your confirmation, class time, and directions to the pool will be sent via email by May 1st. Please do not call for your confirmation.

PLEASE READ THE POOL RULES ON THE CREATIVE ME! WEBSITE CAREFULLY. Your signature below acknowledges you have read and understand them.

I/we _____, the parents of _____
hereby give our approval for our child to participate in the Creative Me! Swim program and hereby waive all claims against Missy Rollins and Creative Me! Gymnastics, or any agents or employees there, for any injury suffered by our child in connection with swimming lessons and the facility. I understand possible risks include, but are not limited to: physical problems associated with pool chemicals, slippage around the pool and even drowning.

Is your child allergic to bee stings? Yes ____ No ____

Please list any physical or mental conditions we should be aware of with your child:

_____ .

Parents Signature _____ Date _____