



# SPRING ACTION TRAMPOLINE

Drop-in number: \_\_\_\_\_

## DROP-IN SPRING 2017

Drop-in for:  Instructional  Public Open Jump

Day of Class: \_\_\_\_\_ Time of Class: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Birth date (D/M/Y): \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Parent's Name (if under 18 years of age): \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Allergies or Medical Concerns: \_\_\_\_\_

How Did You Hear about Spring Action? (please specify the newspaper if possible!)

- Television  Radio  Internet  Newspaper \_\_\_\_\_  
 Other—Please Specify: \_\_\_\_\_

### **Notice Of Warning:**

There is a potential risk of injury involved in training and participating in any sport. Spring Action has made every effort to create a safe and controlled environment for participation. Rules, that must be followed, have also been established for participation and conduct on and about the training area.

### **Terms of Service:**

- I understand that after my third visit I will be required to purchase a Gymnastics Ontario membership.  
 I understand that I must have been previously registered in a Spring Action program and have received flip approval in order to perform flips during the drop-in times.  
 I understand that if I have selected the option to do a Public Open Jump that I will be informed of the rules and guidelines at the beginning of the session and that I will not receive instruction during the session.

### **Information:**

Spring Action collects personal information from their participants for the purpose of registering their clients with Gymnastics Ontario, to issue receipts and to distribute information about our programs. Spring Action values your privacy and we do not sell or distribute your information with any other organization.

\_\_\_\_\_  
Signature of Participant or Parent (if under 18).

\_\_\_\_\_  
Date