

# Desert Tumbling

## Registration Form

Student Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Name(s) of Parent/Guardian \_\_\_\_\_

Phone (Parent/Guardian)

\_\_\_\_\_ home (mother\_\_\_\_ father\_\_\_\_)

Address \_\_\_\_\_

\_\_\_\_\_ work (mother\_\_\_\_ father\_\_\_\_)

City/State/Zip \_\_\_\_\_

\_\_\_\_\_ cell (mother\_\_\_\_ father\_\_\_\_)

Email \_\_\_\_\_

Emergency Contact Information

Are there any health concerns?

Contact Name \_\_\_\_\_

Relationship \_\_\_\_\_

Phone \_\_\_\_\_

How did you hear about Desert Tumbling? \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_