



Adult Class Participant Information

****This information FORM must be filled out before the beginning of the session. Please fill it out, scan & e-mail it back to us at info@championsgymnastics.ca**

This form is NOT a Registration confirmation. To register, you must contact the office and pay for the class. Registration spots are not held until payment in full is received.

Full Name: _____

Date of Birth: _____ Class Day & Time: _____

Class Type: Beginner OR Intermediate OR Advanced

Previous gymnastics experience:

What are your goals for this Class (during this session) ?

This class is a structured/supervised class that begins with a warm-up, stretching and basic gymnastics floor skills. In the second half of the class, the group splits up to work on individual skills. The group is able to use any apparatus in the gym of its choosing, pending approval by the coach.

The coach in charge will follow a standard curriculum of beginner, intermediate and advanced skills, which includes mandatory progressions and spotting for safety purposes.

The coach's role is to provide progressions, spotting & coaching feedback. The participants must follow all Gym Rules (posted and verbal) and the skills being learned will be commensurate to each participant's ability and previous experience. All technical decisions are to be made by the Coach in charge.

You must read through the Assessment Guidelines and Requirements on our website to be sure you are registered in the class type that best fits with your gymnastics experience and future goals.

I have read the Assessment Guidelines and Requirements.

IF participant is UNDER 18 years of age

NAME OF PARENT/LEGAL GUARDIAN: _____

Signature: _____ Date: _____

IF participant is 18 years of age and over

Signature: _____ Date: _____