

Nasser Gymnastics Academy Registration Form

◆ 3055 OLD SHELL RD. ◆ MOBILE, AL 36607 ◆ PHONE (251) 479-9311 ◆
◆ www.nassergymnastics.net ◆ EMAIL: nassergym@yahoo.com ◆

STUDENT INFORMATION

Name _____ Birthday _____ Age/Gender _____
Name _____ Birthday _____ Age/Gender _____
Street Address _____
City, State, Zip _____
Allergies and/or Medical Conditions _____

BILLING INFORMATION *AT LEAST ONE EMAIL ADDRESS IS MANDATORY

Mr. Ms. M/M _____ Last Name _____
Street Address _____
City, State, Zip _____

MOM'S NAME _____ Home Phone _____
Occupation _____ Receive bill statement via email check here _____
Cell Phone _____ Work Phone _____ *Email _____

DAD'S NAME _____ Home Phone _____
Occupation _____ Receive bill statement via email check here _____
Cell Phone _____ Work Phone _____ *Email _____

EMERGENCY INFORMATION (someone to contact if parents cannot be reached)

First Name _____ Last Name _____
Street Address _____
City, State, Zip _____
Home Phone _____ Cell Phone _____

Referral Source: _____
Have you ever been enrolled at Nasser Gymnastics? Yes _____ No _____

Please list your top three choices for classes: 1) _____ We will do our best to place your child(ren) 2) _____ in one of these choices. 3) _____
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Please review and sign the reverse side.

Office Use
Start Date: _____ Class Day, Time, and Level: _____
Registration Amt. Paid: _____ Tuition Amt. Paid: _____ Total Amt. Paid _____
Reviewed Policies? _____ Waiver Signed & Initialed? _____ Charge/Cash/Check # _____
Monthly Tuition: _____ On waiting list? _____ Referral noted? _____
Student entered in file? _____ In computer? _____ In rolls? _____ In Reg? _____ Staff Initials: _____

