

Gender ☐ Boys ☐ Girls

School Name: _____

Name of the Participant: _____
Last Name

First Name

Middle Name



School SFA ID*: _____ Student SFA ID*: _____

Participant's
Residential Address: _____

Date of Birth: Height: _____ Weight: _____ Kg. Blood Group: _____ Age: _____
Day Month Year (Feet & Inches)

Participant Contact Information:

Mob: _____ Res: _____

E-mail: _____

Emergency Contact (Parent / Guardian):

Name: _____

E-mail: _____

Mob: _____ Res: _____

Enrolment Options:

☐ Free Clinic ☐ Rs. 1600 (for 1 month) ☐ Rs. 4500 (for 3 months)

(The fee packages are at special prices for all students from SFA registered schools)

*Schools and Students who participated in SFA Mumbai 2015 can look up their SFA ID on our website www.sfanow.in.

New Schools and new participants will be given their SFA ID at the time of registration.

1. INSTRUCTIONS FOR TRAINEES

- Trainees need to arrive 5 minutes before the scheduled start of a training session
- Trainees should wear appropriate workout shoes & apparel e.g. – a T-shirt with track pants or shorts
- Carry plenty of water & a hand towel

PLEASE NOTE - The registration & packages fees has to be paid in advance & once paid, will not be refunded under any circumstances. Charges for any additional Exercise workshop, Sessions, Assessments, Bootcamps, and Competitions etc. will be separate and would have to be borne by the trainees. There will be no makeup/extra classes for any cancellation due to bank holiday. In case a participant misses more than two weeks of class and Kleinetics is informed in advance, the makeup class will be provided/adjusted in a fixed time period

TERMS & CONDITIONS

I, the undersigned, acknowledge that my child is joining training sessions in a Fitness program involving strenuous exercise & personal body contact. I understand that because of this there is always an inherent risk of injury or infection & that Kleinetics carries no insurance against such injuries & infections. So, by engaging in any of the activities at Kleinetics, I fully acknowledge and accept all risks involved. In consideration for being admitted into the Kleinetics fitness program, I agree to hold Kleinetics, its centres, instructors, employees, officials harmless from all liability that arises, directly or indirectly, from injury to my child, or from injury caused to third parties by my child, while on the premises of the said fitness program, or elsewhere, and at any time in the future. I hereby give permission to Kleinetics to photograph or video shoot my child's participation for future promotions without any compensation whatsoever. I hereby agree to abide by the rules of the chief instructor. I certify that that I have read & understood the foregoing terms & conditions & will abide by them that I have no physical infirmities that would be aggravated by the activities described in these terms & conditions. I also acknowledge that the details provided by me (for my child) in this form are true to the best of my knowledge. I, the undersigned, as parent or guardian of the above applicant, certify that I have read & understood the terms & conditions & I agree to them. I hereby give my consent to the training for my child by Kleinetics

Signature

Relationship with applicant

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For Official Use Only

Form No.:

Date: _____

Inwards No.:

SFA Rec Stamp

For Any Query Contact Us

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