



The Gym Park Corp.
81 Oak Street, Greenpoint N.Y. 11222
(718) 349-6627
Info@TheGymPark.com

Class: _____
Day : _____
Time: _____

Family Participant/ Membership Registration Form

Parents/Legal Guardians Information

Parent #1 Last Name _____ Parent #1 First Name _____
Home Phone _____ Cell Phone _____ Work Phone _____
Parent #2 Last Name _____ Parent #2 First Name _____
Home Phone _____ Cell Phone _____ Work Phone _____
Parent #1 E-Mail _____ Parent #2 E-Mail _____
Home Address _____ Apt# _____ City _____ State _____ Zip _____
Health Insurance Policy Name & Number _____

Participant 1 Information (Please fill out all applicable fields) Previous Member: Yes _____ No _____

Last Name _____ First Name _____
Birth Date ____/____/____ Age ____ Gender ____ Student E-Mail _____

Participant 2 Information (Please fill out all applicable fields) Previous Member: Yes _____ No _____

Last Name _____ First Name _____
Birth Date ____/____/____ Age ____ Gender ____ Student E-Mail _____

Participant 3 Information (Please fill out all applicable fields) Previous Member: Yes _____ No _____

Last Name _____ First Name _____
Birth Date ____/____/____ Age ____ Gender ____ Student E-Mail _____

Participant 4 Information (Please fill out all applicable fields) Previous Member: Yes _____ No _____

Last Name _____ First Name _____
Birth Date ____/____/____ Age ____ Gender ____ Student E-Mail _____

Emergency Information Required: (Someone other than parent if participant is under 18)

Last Name _____ First Name _____ Family _____ Friend _____
Home Phone _____ Cell Phone _____ Work Phone _____
Caregiver Name: _____ Phone: _____

THE GYM PARK CORP. will not register any student in THE GYM PARK program without the waiver form on the back of this page being executed, and the medical clearance form fully filled out by a physician.

THE GYM PARK CORP. Registration/Membership Fee is non-refundable and non-transferable.

Please Make Checks Payable to: The Gym Park Corp.

I understand and comply with THE GYM PARK CORP. GENERAL ETIQUETTE and OPEN PLAY ETIQUETTE submitted with THE GYM PARK CORP. Registration Packet, and I have signed the POLICIES AND WAIVER form on the back of this page.

Signature _____ Date _____

Total Due: _____ Details: _____

Pay 1: _____ Date Rec: _____ Rec By: _____ Cash/Ck/CC #: _____ Bal due: _____

Pay 2: _____ Date Rec: _____ Rec By: _____ Cash/Ck/CC #: _____ Bal due: _____