

SPORtYKES

Participants Last Name _____ First Name _____

Address _____ City _____ Zip _____

Telephone _____ Email _____

Birth Date _____ Sex _____ Age _____

Father's Name _____ Work/Cell Phone _____

Mother's Name _____ Work/Cell Phone _____

Fee Paid: _____ Cash _____ Check (made out to JCBC) _____ Credit Card (see page 2)

Allergies or Disabilities: Yes _____ No _____ Explain _____

Spring 2012 Classes (Week of March 12th –Week of May 21st)

COST: \$105 (10 week session)

No classes week of April 2nd -6th due to Spring Break

Tiny Tykes (Age 2 by the start of class, 30 min/week)

Mondays@9:45 Wednesday @ 9:45 Thursday @ 9:45

SporTykes (Age 3 & 4, must be 3 by start of class, 45 min/wk)

Mondays@10:30 Wednesdays@10:30 Thursdays@10:30 Friday@10:00

Registration is on a first-come, first served basis. No refunds, except if enrollment is insufficient and the activity is cancelled

Parents will not be allowed in the gym during SporTYkes, but must remain at Johns Creek Baptist Church for the duration of Class.

FORMS MAY BE:

- 1.) DROPPED OF AT JCBC REC OFFICES
- 2.) RETURNED BY FAX TO (678) 474-4457
- 3.) EMAILED TO erivers@jcbc.org

WAIVER OF LIABILITY

I/we, the undersigned, understand and acknowledge that participation in a recreational activity can be hazardous and I/we realize that no one should enter into a recreational activity unless the participant is medically able. I/we assume all risk associated with this including but not limited to; falls, contact with other participants or equipment, effects of

weather, equipment failure, and condition of playing area. I/we fully understand it is my responsibility to ascertain if this specific activity contains elements of risk that could prove harmful to a participant. Having read this waiver, and in consideration of acceptance into the program, I and anyone entitled to act on my behalf waive and release Johns Creek Baptist Church and SporTykes, LLC, its sponsors and successors, and their representatives from all claims and liabilities of any kind arising out of my child's participation in this activity. I/we understand and agree to allow Johns Creek Baptist Church and SporTykes, LLC, its sponsors or representatives to use any photos taken in promotional and/or print material.

Signature _____ Date _____
(Parent/ Guardian)



Johns Creek Baptist Church	Participant Name: _____
Credit Card Authorization	Activity/ Items: _____
	Amount: _____
Type of Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	CVV Code (3-digit code on back of card): _____
Card Number: _____	Exp. Date: ____ / ____
Name as it appears on card (please print):	_____
Billing address on account:	_____
Billing zip code on account:	_____
Cardholder's Signature:	_____
<i>By signing this form, I authorize Johns Creek Baptist Church to charge my credit card for the amount above.</i>	