



For Office Use Only

Session I _____
Session II _____
Session III _____
Session IV _____
Registration Fee _____

TOT PLEX TUMBLERS

Classes meet once a week for 50 minutes. Session 1, 2, 3 are eight weeks long and the cost is \$118. Session 4 is nine weeks long and the cost is \$126. **There will be a one time only non-refundable \$25 registration fee for each child per Tot Plex year. Due to staff scheduling, we have a NO REFUND, NO MAKE-UP policy, and switching of classes will not be allowed 1 week prior to the start of the session.**

Please circle class choice and fill out form below. Appropriate for ages 2 to 3 years.

Monday 10:30-11:20

Tuesday 12:30-1:20

Wednesday 9:30-10:20

Thursday 10:30-11:20

Friday 9:30-10:20

12:00-12:50

Players Name _____ D.O.B. ___/___/___ Age _____ Sex _____

Parent or Guardian's Name _____ Home Phone _____

Address _____ City _____ State _____ Zip _____

E-Mail Address _____

Payment Enclosed \$ _____ <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Cr. Card _____ <p style="text-align: center;"><i>There will be a returned check fee of \$25.00.</i></p>
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Sibling Playspace Discount

Discounts are available for infants/toddlers who have an older sibling enrolled in a class. Sibling discounts can be used only on the day that your other child is enrolled in their Tumblers lesson. The cost is \$50.

Siblings Name _____ D.O.B. ___/___/___ Age _____ Sex _____

Siblings Name _____ D.O.B. ___/___/___ Age _____ Sex _____

I do hereby give permission for my child to participate in the Tot Plex programs at the Canton Sportsplex. I understand that he (she) is using The Tot Plex at The Canton Sportsplex at his or her own risk. I specifically agree to waive and release The Canton SportsPlex, The Tot Plex and its employees, agents and officers from any and all claims for loss of damage of property, liability, or personal injury that may arise from the use of The Tot Plex At The Canton Sportsplex. I have read, understand and agree to all of the foregoing.

Parent's Signature _____ **Date** _____

I hereby give permission to release photos taken while participating in activities at The Tot Plex at The Canton Sportsplex. Please Initial _____