



Registration Form

Bring by or
mail to 3434 Roswell Rd., NE, 30305
Questions? Call the GYM Front Desk: 404-842-5852

Class or activity (one per form)	Day(s)	Time	Fee
Participant's Name	Gender	Age and Birthdate (if child)	
Address	Home Phone	Work/Cell Phone	
City & Zip	Parent's Name (if for child)	Email Address	
Emergency Phone	Emergency Contact	Church Affiliation	
Visa or Master Card Number (if mailing or FAXing)	Expiration Date		

In the event of an emergency involving my child, and if Peachtree Presbyterian Gym cannot get in touch with me, I hereby authorize any needed emergency medical care. I further agree to be fully responsible for all medical expenses incurred during the treatment of my child.

Signature of Parent or Guardian

FALL 2004