



Office Use Only

Term 1 2 3 4 **2010 Gym Rego No:-** _____
Entered: Ins Reg Roll MYOB EMAIL
Membership pack issued:
Date: _____ Signed: _____

109 664 569

REGISTRATION FORM 2010

Registering Participants Personal Information

Surname:- _____ **Given Name:-** _____
Address:- _____
Suburb:- _____ **P'code:-** _____ **Email Address:** _____
Telephone:- _____ **(Home) Date of Birth:-** ___/___/___ **AGE Turning:-** _____
Gender :- Male / Female **School/Child Care/Work Member Attends:-** _____
Parents Name: _____ **Parents Mobile:** _____
Date of Registration: _____ **Previous or New Member (Please circle)**

Program Details

Class Type: (please circle)

Gymnastics:- Kindergym Krew – Kangaroo's, Koala's, Wombat's, Platypus'
P2P Monkey's, Bunny's Possum's Seal's, Award 5 or 6, Award 7 or 8, Award 9 or 10
Adults Gymnastics, Special Olympics Gymnastics, Competition Gymnastics MAG / WAG Trampolineing

Dance:- Saturday Morning Dance Cheerleading JETS JRL

Other program: _____

Class Day: First Choice

Monday Tuesday Wednesday Thursday

Second Choice

Monday Tuesday Wednesday Thursday Friday Saturday (please circle)

Class Time: _____

Class Time: _____

*Set times no day choices available for competition teams. **Gymnastics competitive team invitation only.

PLEASE NOTE: Please read our information packs, website for more information on Priority Deadline and how to book in from one term to the next term, Fun Comps and AGDA Fundraising Committee and what the committee can do for your child/ren.

I agree to abide by all AGDA policies and procedures (found in members hand book and on the website. I understand that participation in Gymsport & dance activities carries with it a reasonable assumption of risk.

Parent Signature:- _____ **Date:** _____

Payment Details

Please Tick Box:

- Pay-In-Advance:- Number of Terms: _____ + Joining Fees \$97.85 = _____
- Credit Card on File please tick if you want your Credit Card kept on file for automatic tuition charging for each term until you notify us otherwise. Term Fee\$ _____ + Joining Fees \$97.85 = _____
- Pay by the term. Term Fee \$ _____ + Joining Fees \$97.85 = _____
- Payment plan (please see Reception for terms and conditions)

Payment Options:

- Cheque made payable to AGDA pay to Administration or mail to PO BOX 471 Morayfield Q4506.
- Eftpos
- Cash/ Chq Receipt No: _____, _____, _____, _____
- Electronic transfer to AGDA. BSB: 014524 Acct: 497524706 on transfer please put your child's name payment reason and fax or deliver this form to our office.
- Credit Card Please debit \$ _____ + 2% s.c. from my credit card. 2% service charge on all credit card payments.
- Type of card: Visa Mastercard Bankcard Cardholders Name: _____

Card Number: _____ Exp Date: _____
Cardholders Signature: _____

Date of Payments: _____



OFFICE USE ONLY

TERM Number: _____ Class enrolled into: Class Type: (please circle)	
Gymnastics:- Kindergym Krew – Kangaroo's, Koala's, Wombat's, Platypus' P2P Monkey's, Bunny's, Possum's Seal's, Award 5 or 6, Award 7 or 8, Award 9 or 10 Dance:- Saturday Morning Dance	
Other program: _____	
Class Day: First Choice Monday Tuesday Wednesday Thursday Friday Saturday (please circle)	Class Time: _____
Second Choice Monday Tuesday Wednesday Thursday Friday Saturday (please circle)	Class Time: _____
Class Time: _____	
Amount Paid Breakdown: Tuition Fees paid: _____ Less \$10 Priority Dis (if applicable): _____ Less 10% family dis (if applicable): _____ + Joining Fee: _____ Total: _____ paying by credit card 2%SC = _____ Total Balance paid: _____ PAYMENT TYPE: _____ PAYMENT DATE: _____	
TERM Number: _____ Class enrolled into: Class Type: (please circle)	
Gymnastics:- Kindergym Krew – Kangaroo's, Koala's, Wombat's, Platypus' P2P Monkey's, Bunny's, Possum's Seal's, Award 5 or 6, Award 7 or 8, Award 9 or 10 Dance:- Saturday Morning Dance	
Other program: _____	
Class Day: First Choice Monday Tuesday Wednesday Thursday Friday Saturday (please circle)	Class Time: _____
Second Choice Monday Tuesday Wednesday Thursday Friday Saturday (please circle)	Class Time: _____
Class Time: _____	
Amount Paid Breakdown: Tuition Fees paid: _____ Less \$10 Priority Dis (if applicable): _____ Less 10% family dis (if applicable): _____ + Joining Fee: _____ Total: _____ paying by credit card 2%SC = _____ Total Balance paid: _____ PAYMENT TYPE: _____ PAYMENT DATE: _____	
TERM Number: _____ Class enrolled into: Class Type: (please circle)	
Gymnastics:- Kindergym Krew – Kangaroo's, Koala's, Wombat's, Platypus' P2P Monkey's, Bunny's, Possum's Seal's, Award 5 or 6, Award 7 or 8, Award 9 or 10 Dance:- Saturday Morning Dance	
Other program: _____	
Class Day: First Choice Monday Tuesday Wednesday Thursday Friday Saturday (please circle)	Class Time: _____
Second Choice Monday Tuesday Wednesday Thursday Friday Saturday (please circle)	Class Time: _____
Class Time: _____	
Amount Paid Breakdown: Tuition Fees paid: _____ Less \$10 Priority Dis (if applicable): _____ Less 10% family dis (if applicable): _____ + Joining Fee: _____ Total: _____ paying by credit card 2%SC = _____ Total Balance paid: _____ PAYMENT TYPE: _____ PAYMENT DATE: _____	