



INTRODUCING

Owner and Head Coach: 4 times Overall Champion of Russia,
 3 times World Champion, 2 times Olympic Champion, Coach-
 choreographer of the National Team of Ukraine. Trained
 Champions of the Level 10 Junior Olympic Nationals,
NATALIYA KUCHINSKAYA
 - Honorary Master of Sports.

REGISTRATION FORM

First Name _____ Last Name _____
 Birthday ____ / ____ / ____ Sex ____ Grade ____ School _____
 Home Address _____ City _____ Zip _____ Phone _____
 Mother-Name _____ Occup _____ Phone (w) _____
 Father-Name _____ Occup _____ Phone (w) _____
 Family Doctor _____ Phone _____
 If Emergency, contact _____ Phone _____
 Medical Problems, if any _____
 E-mail Address _____

INTERNATIONAL GYMNASTICS IMPORTANT POLICIES

ONE TIME REGISTRATION FEE of \$25.00 is non-refundable and must be paid along with first Session tuition.
TUITION FEE is payable on or before the First day of the session. A fee of \$15.00 will be charged for any returned checks.
MAKE-UP CLASSES MUST be scheduled with the office. Please call ahead to arrange the Make-up class. No make-up classes past end of session.
 We reserve the right to cancel any class at any time. We will contact you before class and arrange another class time.
CLASS DISCOUNTS. Any student enrolling in more than one class will receive a 15% discount on their second and third classes.
 Discounts are only applicable when registering for a 10 weeks session. Registration fees are not included.
 Every effort will be made to honor friendship and teacher requests. We **cannot** guarantee them.

MEDICAL RELEASE FORM

I give my approval for the above named student's participation in any activities of the program.
 I hereby forever waive, and forever release and discharge the International Gymnastics Inc, their officers, directors, employee and agents from all liability for any and all damages and injuries suffered by the participant in connection with said use of the aforementioned equipment, infractions and facilities.
 As a student or parent or guardian of a student, that it is my option to consult a physician for assurance of proper health and have been encouraged to do so by the International Gymnastics Inc.
 I authorize the representatives of International Gymnastics Inc. to provide any emergency medical services that may be required due to an injury during any gymnastics activity at or for International Gymnastics.
 I understand that participation is entirely by my own choice and with the understanding that there is risk and the possibility a accidental injury, paralysis any activity involving unusual motion or height.
 The International Gymnastics Inc. is not responsible ,whatsoever for anything that happens before or after the student's designated class time.
I do hereby verify that I understand and accept each of the above policies and condition.

GYMNASTICS CLASSES

Parent & Tot Classes (Ag.2-3) (45min)	Intermediate Girls (Ag 8-14) (1hr15min)
Pre-School Gymnastics (Ag.3-5) (55min)	Advanced Intermediate Girls (Ag 9-15) (1hr30min)
Kindergarten Class: (Ag. 5-6) (1hr15min)	Tramp and Tumble (Excellent for Cheerleaders)
Beginner Girls/Boys (Ag.6-9) (1hr15mn)	(Ag 8-15) (1hr15min)
Beginner Boys (Ag7-10) (1hr15min)	High School Girls (Ag13-19) (1hr 30 min)
Advanced Beg. Boys (Ag.7-14) (1hr15mn)	
Beginner Girls (Ag.6-13) (1hr15min)	
Advanced Beg. Girls (Ag 7-13) (1hr15min)	
Advanced Girls (Ag 8-14) (1hr15min)	

Signature of Parent, Guardian or Participant (if over 18) _____ Date _____

**Make checks payable to : International Gymnastics

520 Business Center Dr, Mount Prospect, IL 60056

Registration Fee _____ Date _____ Tuition Fee _____ Date _____

Class	Age group	Time	Start Date
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