



**Mini Surfers - Consent form**  
**Session #1 2018**

**CLIENT STATEMENT:**

I (parent guardian first\last name)\_\_\_\_\_am registering  
(Childs First Name\Last Name) \_\_\_\_\_  
for the Mini Surfer fitness class - 4 week program run by Circle Studio.

I also understand that the materials provided are for those participants of the program only. I understand this program will focus on balance, strength and stability for children ages ~4-6 years of age with the accompaniment of a parents or guardian (18 years or older). I understand classes will be held at Circle Studio (4215 Petrolia Line, Petrolia).

Date: \_\_\_\_\_

Name of child (please print): \_\_\_\_\_

Age of child: \_\_\_\_\_

Shirt size (please check one) : XS ☐ S ☐ M ☐ L ☐

Address: \_\_\_\_\_

City\Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_

\*\*Email: \_\_\_\_\_

**Mini Surfer Fitness Classes (4 week session):**

(\* Classes begin the week of August 1st )

<b>A)</b> <b>Wednesday 4 week session:</b> <b>August 1-22<sup>nd</sup></b> <b>\$50+tax</b> <b>10:30-11:00am</b>	<b>B)</b> <b>Thursday 4 week session:</b> <b>August 2-23<sup>rd</sup></b> <b>\$50+tax</b> <b>5:30-6:15pm</b>
<b>Total: \$ 56.50</b>	<b>Total: \$ 56.50</b>

The registration fee can be payable to (EMT – [circle.studiopetrolia@gmail.com](mailto:circle.studiopetrolia@gmail.com)),

Please use the password: **MINISURFER2018** for EMT

I allow Circle Studio to photograph this event and consent to my child's picture being taken

YES \ NO

Please list any allergies\sensitivities (topical, airborne or ingested) we should be aware of:

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Signature of Guardian\Parent: \_\_\_\_\_

Date: \_\_\_\_\_

*Thank you for your business- Circle Studio .  
All information contained on this form will be kept strictly confidential.  
Updated 2018*