

CCGC Registration

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Telephone: 207-761-9493 Fax: 207-761-9735

CHILD'S NAME _____ DOB ____/____/____

SECOND CHILD _____ DOB ____/____/____

THIRD CHILD _____ DOB ____/____/____

PARENT'S NAME _____

PARENT'S NAME _____

MAILING ADDRESS _____

_____ ZIP _____

HOME PHONE _____ CELL PHONE _____

HEALTH INSURANCE _____

HEALTH CONCERNS _____

Fall Session Winter Session Spring Session Summer Session

CLASS DESIRED/DAY _____ TIME _____

SECOND CHILD/DAY _____ TIME _____

THIRD CHILD/DAY _____ TIME _____

SUMMER CAMP WEEKS _____

Release Form: I fully understand and appreciate any activity including motion, rotation or height may cause serious accidental injury. As a condition of accepting my child I agree to hold Cumberland County Gymnastics Center harmless. I understand the refund and make up policy.

Signature of Parent/Guardian _____

For Office Use Only:

Sales \$ _____

Registration Fee \$ _____ } Total \$ _____

Deposit _____ \$ _____ Date _____

Payment _____ \$ _____ Date _____

Payment _____ \$ _____ Date _____

Visa/MC/AMEX/DIS # _____ Exp. _____

CVV# _____ Card Holder's Name _____

Book Invoice

CCGC Registration Frequently Asked Questions

Please return registration form with a **\$50 non-refundable** deposit towards the balance of the class and a **\$40.00 non-refundable** annual registration fee where applicable.

When is registration fee applicable? Please note the \$40 registration fee is an annual fee. Our year begins with the Fall Session. Also note students enrolling only for the Summer pay a reduced registration fee of \$10.

Summer Students: Please return registration form with the full payment. Summer registration fee is \$10 for students who were not a part of our Fall, Winter or Spring Session.

All balances are due in full on the first day of classes.

More questions? Please do not hesitate to contact us at:

ccgc@maine.rr.com

Phone: 207-761-9493

Thank you!

www.ccgcmaine.com