Fusion Gym - Children's Kickboxing Registration Form

Welcome to Fusion Gym "Kids Kickboxing"

Name(s) of Sibling(s) Registering: ___ Apply sibling discount: \square Yes \square No

We're excited about your interest in our children's kickboxing classes at Fusion Gym, Central Park Utrecht. Please fill in your details below to reserve a spot for your child. After registration, we'll send you all the practical information about the classes.

FUSIO	N GYM – CHILDREN'S KICKBOXING REGISTRATION FORM
:	Full Name:
🍰 PAI	RENT/GUARDIAN INFORMATION
•	Full Name:Phone Number: Email Address:Relationship to Child:
► EM	ERGENCY CONTACT (OTHER THAN PARENT/GUARDIAN ABOVE)
	Full Name:Phone Number:Relationship to Child:
CLA	ASS DETAILS
	Preferred Day: ☐ Thursday Start Date:
👪 SIB	LING INFORMATION (IF APPLICABLE)

■ PHOTO/VIDEO PERMISSION	
I \square give / \square do not give permission for photos or videos of my child to be taken during classes or events, and for these to be used by Fusion Gym for promotional purposes (e.g., website, social media).	
PAYMENT AUTHORIZATION (SEPA DIRECT DEBIT)	
By signing this form, I authorize Fusion Gym to automatically debit the monthly fee of €39,50 per child (minus applicable discounts) from my bank account.	
Account Holder:	
• IBAN:	
Place and Date:	
• Signature:	
CONSENT & AGREEMENT	
I hereby give permission for my child to participate in kickboxing classes at Fusion Gym. I understand that the	
classes involve physical activity, and I accept responsibility for any risks involved. I agree to follow the gym's	
safety guidelines and instructions from trainers.	
I confirm that I am the parent/legal guardian of the above-mentioned child.	
Toomin that I am the parent legal guardian of the above mentioned emid.	
Signature Parent/Guardian:	
Date:	
Dutc.	
§ FEES	
• Monthly Fee: €39,50 per child	
• Sibling Discount: 10% off for each additional child	