T2 Booking Information

Child's Full Name	DOB	PCYC Membership Number
1.		
2.		
3.		
4.		

Parent/Guardian & Emergency Contact Information

Name & Relationship	
Address	
Phone	
Email	
Second Emergency Contact	
Name & Relationship	
Phone	

Other Adults Authorised to Collect

Name & Relationship	
Address	
Phone	
Email	

Health, Medical Conditions & Complex Behaviour

If your child has been diagnosed with any Health or Medical Conditions, is known to display symptoms of Complex Behaviour or demands any Special or Dietary Needs, please fill out the PCYC Health & Medical Form (please see PCYC staff to access this form).

Applicable:

Y N N





T2 Booking Details

S	PORTS AN	ND ART I	PROGRAMS	
ACTIVITY		AGE	TIME	SELECTED CLASS
		MONDAY		
Junior Boxing	\$125	5 to 11	4pm to 5pm	
Youth Boxing	\$125	11 to 16	5pm to 6pm	
Junior Judo	\$125 + Rego	5 to 14	6pm to 7pm	
Senior Judo	\$130 + Rego	16+	7pm to 8pm	
		WEDNESDAY		
Junior Boxing	\$125	5 to 11	4pm to 5pm	
Youth Boxing	\$125	11 to 16	5pm to 6pm	
		THURSDAY		
Junior Basketball skills	\$125	5 to 9	4pm to 5pm	
Youth Basketball Skills	\$125	10+	5pm to 6pm	
		FRIDAY		
Junior Boxing	\$125	5 to 11	4pm to 5pm	
Youth Boxing	\$125	11 to 16	5pm to 6pm	
Judo NSW Registration	\$100 for 12 month	s https://www	.revolutionise.com.au/j	udonsw/clubs-rego/
	GY	MNASTI	CS	
ACTIVITY		AGE	TIME	SELECTED CLASS
		MONDAY		
Gym Star	\$160	5 to 11	4pm to 5pm	
Gym Skills	\$160	8 to 14	5pm to 6pm	
		TUESDAY		
Gym Star	\$160	5 to 11	4pm to 5pm	
Gym Skills	\$160	7 to 14	4pm to 5pm	
		WEDNESDAY		
Jnr Gym	\$160	3 to 5	4pm to 5pm	
Gym Star	\$160	5 to 11	4pm to 5pm	
Gym Skills	\$160	8 to 14	5pm to 6pm	
		THURSDAY		
Gym Star	\$160	3 to 5	4pm – 5pm	
		FRIDAY		
Gym Star	\$160	5 to 11	4pm to 5pm	
Gym Skills	\$160	8 to 14	5pm to 6pm	
		SATURDAY		
Kindy Gym	\$160	18m to 3	9am to 10am	
Jnr Gym	\$160	3 to 5	10am to 11am	
Gymstar	\$160	5 to 11	11am to 12pm	
Gym NSW Registration		\$65 f	or All rec Gymnastics	

Payment Details

Payment Details (If not paying pro rata directly at PCYC)			
Card Number			
Name on Card		Signature	
Expiry Date		CVC Number	





Terms & Conditions

und —		ms, and conditio		enrith gymnastio	ree to the indemnity statemes program. I have read an Team member Staff:
une	knowledgements, terr derstood the terms ar Sign	ms, and conditio	ons of the PCYC Pe	•	cs program. I have read an
	knowledgements, terr derstood the terms ar	ms, and conditio	ons of the PCYC Pe	•	cs program. I have read an
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	knowledgements, terr	ms, and conditio		•	•
I_ acl				•	•
	31st of December re	gardiess of writ			
_	payable upon the first	st gymnastics be	•		registration will expire on th
	I understand that the	ere is a non-refu	ındable \$65 Gymna	astics Australia	insurance/ registration fee
	I, the undersigned, agree that neither the PCYC nor its partners are liable for any losses, damage and/or injury occurred and/or sustained by my child/ren in attending Home.				
	or illness and I agree		•		it of any unioreseen acclus
					ons my child may have. PC nt of any unforeseen accide
	I accept full responsibility for my child/ren's behaviour during the program and in the event of misbehaviour my child/ren may be excluded from the class.				
П	essential information	•	•		•
	·	nity statement	I the narents/guard	lian have read	and agree to the attached
				•	ld to participate in the PCY in full at the time of booking
e p	parent/guardian, have	read and agree	e to the terms and o	conditions outlin	ned and:
CII	nnity Statement				
ΔM					
	I do not give permiss	sion.			
	promotional purpose I do not give permiss	es in official publ	•	•	e and/or words to be used outh Clubs NSW.



