

SPORTS ACADEMY - REGISTRATION FORM

New registration Return registration Yes	ear Sport Sport
INFORMATION	
Last name:	First name:
Date of birth: / School:	Class:
Father's last name: Mother's last name: Guardian's last name:	First name:
Address: Mob. Fathe	•
_	ation number of financially liable:
☐ Pierce student: (ID#	(ID#
All memberships are personal, not transferable and non refundable MEDICAL CERTIFICATIONS HOW DID YOU HEAR ABOUT OUR PROGRAM? ACG website Colleague Email	
OTHER One (1) recent photograph	☐ Brochure ☐ Advertisement ☐ Other
METHODS OF PAYMENT 1. Cash 2. Credit card Total amount: €	grounds and facilities and/or a participant's negligent, reckless or irresponsible conduct within their grounds. The American College of Greece and the Deree College Athletic Club are not liable for any damages to vehicles of participants while they are parked on its premises. The American College of Greece and the Deree College Athletic Club are not liable for any loss of personal property or valuables that the participants choose to bring with them. The
GROUP: Registration Fee Days: Monthly fee: €	
Hours: Season fee: €	Signature: Date: / /
Received by:	Lineigency Contact.