NMSU RecSports Alternative P.E Climbing Registration Form

(One form per child: Please print clearly)

* Required Information			
*Participant's Name:		D.O.B	Age:
*Parent/Guardian Name:			
*Participant's Address: Street:		City:	State:Zip:
*Parent/Guardian E-mail	:		
*Participant's Phone#:(_)		
*Emergency Contact Nam	ıe:		
Home Phone:	Work Phone:	Cell:	
(If you have any medical instructor.)	conditions or medicatio	ons you would like to	disclose, please speak with your
Payment Information:			
Monthly Fee: \$60.00 +tax per month. Fee will be prorated if both conditions are met: • Participant is registering for the first time. • Participant registers after the 15th of the month. * Payments are due by the 10th of each month in room 103 of the Aggie Fit Office. Late payments are			
-	received after the 10th.		be allowed to participate in any
Current Aggie Fit Membe AggieFit/Lapp/NMSU ID			
			Total:
and employees from any and a	ll liability or cause of action	resulting from my child's p	New Mexico State University, its agents participation in activities at the New y heirs and personal representatives.
X			
Parent/Guardian Signatu	re		
paid with credit card, and (refunds will only be given if t	(2) have provided document the coordinator has received	ation of a medical circums I notification prior to the b	both the following conditions: (1) have tance that hinders participation. Full eginning of the session. Partial refunds sed on the number of classes missed.
Completed by sta	ff only:		
		Register	red Bv: