

REGISTRATION FORM

PERSONAL DETAILS (Please fill this form in CAPITAL LETTERS. Incomplete forms will not be accepted.)

Name: _____

Middle Name: _____

Surname: _____

Date of Birth (dd/mm/yy): _____

Address: _____

City: _____ State: _____ Pin

code: _____

Tel. (R): _____ (O): _____ (M): _____

Email: _____

Student's Occupation: _____

Father / Husband's Name: _____

Occupation: _____

Office Tel. No.'s: _____ Mother's Name: _____

Occupation: _____

Office Tel. No.'s: _____

Affix your photo
here

HEALTH HISTORY QUESTIONNAIRE

MEDICAL HISTORY

Are you currently suffering from any illness or taking any medications
(including vitamins and supplements)? YES / NO

If YES, please describe: _____

EXERCISE

Do you exercise currently? YES / NO

If YES, please describe Days / Hours / Type of exercise: _____

DISCLAIMER AND LIABILITY WAIVER

1. The above mentioned student, for where the student is below 18 years of age, the parent or natural guardian hereby confirms that the student has been hereby advised by a competent medical examiner that the student is medically/mentally/physically fit to participate in class.
2. It is expressly understood by the student and/or the student's parents and/or guardian, as the case may be (hereinafter referred to as the "student", for the sake of convenience), has voluntarily chosen to participate and/or perform out of their own free will and is not under any kind of pressure from the class.
3. The student understands, acknowledges and accepts that participation in class could be a strenuous physical activity and may involve risk of accident, or injury to the student. In case of injury or any medical condition, the student authorizes the class teacher to administer medical treatment as deemed fit.
4. Class timings depend on class size and suitability, age 5 and above.
5. Make up classes are done only when the class is cancelled by the teacher.
6. Students should come in uniform and be punctual.
7. Fees should be paid at the beginning of each month.

I ACCEPT,

Student's Signature

Parent's Signature