

Ph: 740.452.1200 SPECIAL EVENT REGISTRATION

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| Participant's Name | Sex | Age | D.O.B. | . , | |
| | | | | Cell Phone: () | |
| Participant's Name | Sex | Age | D.O.B. | | |
| | | | | Emergency: () | |
| Street | City | | State Zip | | |
| ledical conditions or allergies to which | h we should be ale | erted?: | | | |
| Iom's Name: | Place of Business: | | | Phone: | |
| ad's Name: | | Place of Bu | isiness: | Phone: | |
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Champion Gymnastics & Cheer ● 1522 Highpointe Court ● Zanesville, OH 43701 ● ph: (740) 452-1200 Please read the Registration Agreement and Understanding attached before applying signature.

Please fill out this form and bring it with you the day of the party!