



# PERMISSION SLIP AND STUDENT INFORMATION FORM

Please complete and sign the permission slip below. You may return completed forms to your school, fax to (425) 458-4570, or register on-line at [www.dizzybus.com](http://www.dizzybus.com).

**MONTHLY TUITION \$44 (for 4 classes)**  
**\$15 annual registration fee**

Student's Name \_\_\_\_\_ Nickname \_\_\_\_\_ M/F \_\_\_\_\_  
Address \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_ Siblings & Ages \_\_\_\_\_  
Parent/Guardian's Name (1) \_\_\_\_\_ Home Phone # \_\_\_\_\_  
Parent/Guardian's Name (2) \_\_\_\_\_ Work Phone # \_\_\_\_\_  
E-mail\* \_\_\_\_\_ Cell # \_\_\_\_\_

**\*Please provide us with your e-mail address so we can send you tuition reminders and keep you informed about any class changes. Your email information will not be shared with others.**

Student's School/Daycare Facility \_\_\_\_\_ Classroom \_\_\_\_\_

Typical Days and Time attending the School/Daycare **M T W Th F** Hours: \_\_\_\_\_

We give gummy bears, does the student have any allergies or medical conditions? \_\_\_\_\_

- I agree to pay the monthly tuition by the first class of each month.
- A \$5 late fee will be assessed to all tuition payments not received by the 2nd class of the month.
- I can receive a credit for up to two classes annually if I notify the Dizzy's Tumblebus & Bus Stop office regarding my child's absence before the next scheduled class.
- My child will be automatically enrolled the following month unless I notify Dizzy's Tumblebus & Bus Stop that I will be withdrawing my child. Should I choose to withdraw my child, I must notify Dizzy's Tumblebus directly and I will not rely on my child's school to inform Dizzy's Tumblebus. Not paying your monthly tuition is not the same as disenrolling your child.
- I understand that a risk is involved with participation in gymnastics and related activities which requires adherence to all rules of Dizzy's Tumblebus & Bus Stop.
- I, the undersigned parent/guardian, release Dizzy's Tumblebus & Bus Stop, its officers, instructors and coaches, and the childcare facility associated from all responsibilities and all claims for injuries received while participating or practicing gymnastics and its related activities.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

**You may pay by check or Visa/MasterCard. If paying by credit card please indicate whether this card may be billed automatically at next billing cycle. YES \_\_\_\_\_ NO \_\_\_\_\_**

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Zip Code \_\_\_\_\_ Signature \_\_\_\_\_

**IF YOU WOULD LIKE TO ORDER A DIZZY'S TUMBLEBUS T-SHIRT FOR YOUR CHILD, PLEASE INDICATE THE SIZE BELOW AND INCLUDE AN ADDITIONAL \$10.00 WITH YOUR ENROLLMENT FORM.**

**T-SHIRT SIZE:  X-SMALL (2-4)  SMALL (6-8)  MEDIUM (10-12)**