## **Down with Fitness**

## **Registration Form**

How do we contact you?	
Parent's Name	
Phone	
Email	
Tell us about your child	l:
Child's Name	
Gender	
Age	
Are there any medical problems that we shou be aware of?	Id
Does your child have ar fitness/sports/games li or dislikes?	
Who will be helping from your family?	
Name(s)	
Age(s)	
Relationship to child	
May we use your child's image in conjunction with blogs,	

Please mail completed form to: John Cissik

Youtube videos, or Facebook postings about this event?

3600 Cherry Blossom Ln McKinney, TX 75070