



Kinex Academy Registration

Registrant's Information

Child's Name Last Name

Gender: M F

Month Day Year

Birth Date Age

School Grade

2 Friend's

Parents' & Emergency Contact Information

Mother's Name Last Name

Home Address Apt

City State

ZIP

Cell Phone

Home Phone

Work Phone

E-mail

Father's Name Last Name

Home Address Apt

City State

ZIP

Cell Phone

Home Phone

Work Phone

E-mail



Registrant's Medical Information

Medical Insurance Company

Policy #

Medical/Physical Conditions we should know about:

Program Registration Information

Please check the program/s and sessions you wish to enroll in.

Kinex Track & Field Programs	Fees	#Registrants	Subtotal
<input type="checkbox"/> After School Enrichment Track & Field (school playground)	\$165		
<input type="checkbox"/> Optional 2 nd weekly track practice (Tam High Track)	\$100		
<input type="checkbox"/> Track Meet Entrance Fee (Mill Valley Track & Field Championships)	\$50		
<input type="checkbox"/> Kinex School Team track & field uniform	\$50		
<input type="checkbox"/> Kinex Academy Track & Field AAU Club (Please check if you are interest in more info) Indoor Season (Nov-March)			
<input type="checkbox"/> Kinex Academy Track & Field AAU Club (Coming Soon!) Outdoor Season (April-July)			

Total Payment Included CHECK #

TOTAL

To complete your registration follow these 4 steps:

1. Fill this form out on your computer and save it. Press
2. Email the completed registration form as an attachment to gerald@kinexacademy.com
3. Print out this form and sign the WAIVER AND RELEASE OF LIABILITY (page 3)
4. Make Check payable to Kinex Academy
5. Mail completed registration form and check with full payment to:

**Attention: After School Enrichment
Kinex Academy
1 Coach Rd.
Mill Valley, CA 94941
847-5906**



WAIVER AND RELEASE OF LIABILITY:

In consideration of my child's participation in the Kinex Track & Field program, I hereby release Kinex Academy, its coaches, officers, employees and agents for any and all liability arising out of any injury or illness my child incurs while participating in track & field activities. I understand the rigorous athletic activity involved in the Kinex Track & Field program which he/she will be involved. and understand that participation in all activities is voluntary and I choose freely to have my child participate.

By applying for the Kinex Track & Field Program, I agree to complete and return to Kinex Academy the confidential Consent for Medical Administration and the Medical Treatment Form and Health Advisory Questionnaire. I understand these forms need to be completed and on file prior to my child's participating in the Camp activities. (These forms will be e-mailed to all parents/guardians when applications are received).

By applying for this camp, I understand that Kinex Academy may take photographs and/or videos of camp participants and activities; I agree that Kinex Academy shall be the owner of and may use such photographs and videos relating to the promotion of future Kinex Academy programs. I relinquish all rights that I may claim in relation to the use of said photographs and videos.

Must be signed by a parent or guardian.

Parent's Signature _____ DATE _____