



## ENROLLMENT/CONSENT FORM

Youth Fitness Consultants, Inc. (KID-FIT CHICAGO) will be bringing KID-FIT™ to your school/Recreational Facility. Please PRINT all information on the front and back, sign and return the consent form to your school/facility or mail to Youth Fitness Consultants, Inc. 7728 Ogden Ave, Lyons, IL 60534. If you have any questions contact Lannette Wolford at 708-404-0267. *Illegible forms will be returned.*

Name of School/Facility \_\_\_\_\_ Parent's Name \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

Ph# \_\_\_\_\_ Email: \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact (name, relationship and telephone number). \_\_\_\_\_

Medical Conditions or Important Information about your child \_\_\_\_\_

I certify that the child named above appears to be free from infectious disease, and that there is no reason why he/she should not be able to participate in an exercise program. I fully understand that my child may injure his/herself as a result of participation in KID-FIT exercise programs. I agree to hold Youth Fitness Consultants, Inc., Lannette Wolford and all Youth Fitness Consultants, Inc. staff members harmless in all matters concerning all accidents and injuries that occur during my child's participation in the KID-FIT program. KID-FIT reserves the right to drop your child from class for non-payment of tuition, behavioral issues or low enrollment at your facility. I have read and agree to adhere to the policies stated below for my child's participation in the KID-FIT program.

Parent's  
Signature \_\_\_\_\_ Date \_\_\_\_\_

### PHOTO RELEASE

I hereby give Youth Fitness Consultants, Inc. (KID-FIT CHICAGO) permission to take photographs/video of my child or photographs/video in which my child may be involved with others for the purpose of promoting the KID-FIT program. I hereby release and discharge Youth Fitness Consultants, Inc. from any and all claims arising out of use of the photos. I am above the age of 18. I have read the foregoing document and fully understand its contents.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Date: \_\_\_\_\_