



Registered On: _____/_____/_____

Initials: _____

Please fax registration to: 845-517-1499
or Mail to: Vision Sports Club
37 West Jefferson Ave, Pearl River, NY 10965

VISION

SPORTS*ZONE

KIDZ SPORTZ

10 Weekly Classes

Starting november 19th: Ages 3-5 yrs

Vision's Kidz Sportz Mini classes Registration

Child's Name

Birth Date

Age

Parent's Name

Email

Address

City

State

Zip Code

Phone

Emergency Contact

Phone

Card Holders Name

AMEX

MasterCard

CSV

VISA

Discover

Exp Date

Billing Address

City

State

Zip

Signature

*No Refunds. All Sales are final.

Sessions

(Check all that apply)

Tuesdays
9:00am-10:00am

Single Session(s)

of Sessions

10 Session Package
\$199

Single Session
\$23

All Sales Final _____ Initial Here

Fitness Consultant _____

Form of Payment _____