



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**

**Munchkins**

**Music & Movement!**

**10 Weekly Classes Ages 2-6 years**

## Vision's Music & Movement Registration

Child's Name			Birth Date			Age		
Parent's Name			Email					
Address			City					
State		Zip Code		Phone				
Emergency Contact				Phone				

Card Holders Name		
<input type="checkbox"/> AMEX	<input type="checkbox"/> MasterCard	_____ CSV
<input type="checkbox"/> VISA	<input type="checkbox"/> Discover	_____ Exp Date
Billing Address		
City	State	Zip
Signature		

\*No Refunds. All Sales are final.

## Sessions

(Check all that apply)

**Wednesdays**  
1:00PM-2:00PM

**Single Session(s)**

**# of Sessions**

**10 Session Package**

**\$199**

**Single Session**

**\$23**

All Sales Final \_\_\_\_\_ Initial Here

Fitness Consultant \_\_\_\_\_

Form of Payment \_\_\_\_\_

Pricing Subject to Change. Some Restrictions May Apply. All Sales are Final.

37 West Jefferson Ave, Pearl River NY 10965 . www.VisionSportsClub.com . 845-517-1400