

Child Name(s): \_\_\_\_\_

## Tri-Star Gymnastics & Dance

66 Third Street, Suite 101  
Dover, NH 03820  
603-749-1234 603-749-5678 Fax  
tristargymnh.com

### REGISTRATION, PAYMENT AND MAKE-UP POLICIES

- \_\_\_\_\_ I understand that the Registration Fee is non-refundable.
- \_\_\_\_\_ I agree to call the camp line at 603-749-5678 to report my child absent from camp.
- \_\_\_\_\_ I understand that there are no refunds & no switching of days. **NO EXCEPTIONS**. Days can be added based on availability.
- \_\_\_\_\_ I understand that the charge for a check returned for any reason is \$25.00.
- \_\_\_\_\_ I understand that I am responsible for all collection and legal fees accrued regarding any unpaid balances.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_ Copy given to customer

\_\_\_\_\_  
Staff Initials

**FILE COPY**

FORM 7

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