

Preschool Drop-in Registration Form 2024-2025

\$48.00 GymSask Fee required for all participants.

Participant Information: please print legibly.

Name: _____

Address: _____

City: _____ Postal Code: _____

Date of Birth: _____ (dd/mm/yyyy)

Gender: male / female / prefer not to say

Parent or Guardian Information:

Parent/Guardian #1 name:

Parent/Guardian #2 name:

Email address (if you have an account already, the one you have previously used):

Phone number: _____

Parent signature: _____ Date: _____

GymSask Fee Method of Payment: _____

