



BOOKING FORM

CHILD'S NAME

ADDRESS.....

..... POSTCODE

DATE OF BIRTH

PARENT/GUARDIAN'S NAME

TELEPHONE NUMBER.....EMAIL.(please print).....

SPORTS CLUB MEMBERS £65.00 NON MEMBERS £67.50

SATURDAY Sat 11th January – 28th March

NO GYM on Sat 8th or 15th February

10 wks

9.15am – 10.00 am	3 to 5 yrs	<input type="checkbox"/>
10.05am – 10.50am	P1 – P2 intro to gymnastics	<input type="checkbox"/>
10.50am – 11.45am	P3 - P7 gymnastics	<input type="checkbox"/>
11.45am – 12.30pm	P1 – P3 intro to gymnastics	<input type="checkbox"/>
12.30pm – 1.15pm	P1 – P5 intro to gymnastics	<input type="checkbox"/>

Priority booking for people in the class **will end** on **Saturday 14th December.**

If you do not return your booking form by this date or contact Gymini your place will not be guaranteed. Please consider yourself enrolled in the class of your choice unless you hear from us to the contrary. Please note refunds will not be given for cancelled bookings.

I enclose a cheque/cash for £.....Payable to **GYMINI for Schools LLP**

Cheque number

SIGNEDDATE

PLEASE RETURN FORM TO: GYMINI
17 WESTER BROOM DRIVE
EDINBURGH
EH12 7QS

TELEPHONE 0131 334 3657 WWW.GYMINI.CO.UK email: info@gymini.co.uk