



TUMBLEBUS

"A Gym on Wheels"

FREE CLASS PERMISSION SLIP



Dear Parents,

TUMBLEBUS is a "gym on wheels" -- a cheerfully decorated bus, filled with fun equipment, bringing fitness to children while they are at school; thus saving you valuable evening time. We know you are concerned about the total well-being of your child, which definitely includes fitness. Our program meets that fitness need without having to transport your child. Each week we offer a structured lesson plan with wonderful themes children love. Children are taught basic gymnastics with fun-filled physical exercise.

Please fill out and sign this Permission Slip so your child can take part in a FREE TUMBLEBUS CLASS!

STUDENT NAME _____ NICKNAME _____ AGE _____ BIRTH DATE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____ MALE FEMALE

HOME PHONE _____ CELL PHONE _____ EMAIL _____

CHILDCARE FACILITY _____

PARENTS SIGNATURE _____ DATE _____

MUST BE FILLED OUT COMPLETELY TO PARTICIPATE IN FREE CLASS!



TUMBLEBUS ENROLLMENT FORM

TUMBLEBUS is an ongoing program.
We will be taking your child every week unless you call TUMBLEBUS to discontinue.



Call 855-TUMBLE2

4 PAYMENT PLANS (Check One)

TumblebusNY@gmail.com

Plan A - \$12 Weekly
(2nd Child \$8, 3rd FREE) Cash/Check only

Plan B - \$48 Monthly
(2nd Child half price)

Plan C - \$44 Monthly Auto Charge
(2nd Child half price)

Plan D - Pay in Full (2nd Child half price) Call 855-TUMBLE2

Enclose your first payment with this enrollment form. All payments should be placed in the TUMBLEBUS Mailbox at your childcare facility. Please do not turn your money or enrollment form in to the daycare center or teacher. Make checks payable to TUMBLEBUS. Put cash in envelope with child's name.

You can also go to www.TumblebusNY.com to register and pay online!

Child #1 Name _____ Age _____ D.O.B. _____

Child #2 Name _____ Age _____ D.O.B. _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Email _____

Childcare Facility _____ (EMAIL NEEDED FOR BILLING)

Medical Conditions? _____

Parental Consent: I, the undersigned parent or guardian, give my permission for my child to leave the daycare center, without an employee of the daycare center, in the hands of the Certified TUMBLEBUS employee. I release TUMBLEBUS, their officers, instructors, and the daycare center from all responsibilities and all claims for injuries while participating in gymnastics and its related activities. I understand that my child's picture may be used in promotional materials. No names will be used. Check here if you do not want your child's picture used.

Parent/Guardian Signature _____ Print Parent Name _____

Name as on Credit Card _____ Card # _____ Exp. Date _____ Sec. Code _____

Type of Card: Credit (charged after 1st of ea. month) MasterCard Visa Discover AMEX Other _____ Debit (Fill in day to charge it _____)

Check here if you would like for your Card to be charged: Automatically each month One time only In full