



www.fastmaz.com

email: fastmazz@comcast.net

***FastMaz Speed, Agility, Quickness Clinic Sessions:
Nov. 15, 22, 29, Dec. 6, 13, 20***

Registration Form/Permission slip

I/We the parent(s)/guardian(s) of

Athletes Name and current grade in

school: _____

give my/our permission to Coach Marilouise Mazzante to train my/our child with a training regiment for speed/agility/ and quickness. Giving my permission means I/we agree to absolve Marilouise Mazzante of any responsibility or liability due to an accident, injury, or illness, which may occur during/ through training.

Through signing, I/we agree to these provisions, I understand its contents and are in agreement as outlined to include pictures to be used in the media.

(2020) Parent/Guardian signature

Email address _____

Cell # _____

(Checks payable to: Marilouise Mazzante) & Registration forms should be mailed to:

1215 Arthur Rd.

Montoursville, PA 17754

Questions? 570-220-9904

Email contact: Fastmazz@comcast.net