

**Gym Preferences & Interests**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Age: \_\_\_\_\_\_\_\_\_

Parent/Responsible Party: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please select all items that apply to you/your child’s goals at The University of Gymnastics:

\_\_\_\_ Recreation

\_\_\_\_ Fitness

\_\_\_\_ Progression

\_\_\_\_ Social Skills

\_\_\_\_ Coordination

\_\_\_\_ Flexibility

\_\_\_\_ Strength

\_\_\_\_ Agility

\_\_\_\_ Extra-Curricular Involvement

\_\_\_\_ Academic Enrichment

\_\_\_\_ Private Lessons

\_\_\_\_ Competitive Programs

\_\_\_\_ Specific Skills, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_ Others, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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