

Spring Day Camp

Sign Up Sheet

Child's Name _____ Age _____

2nd Child's Name _____ Age _____

Parent's Name _____ email _____

Address _____

Phone Home _____ Work _____ Cell _____

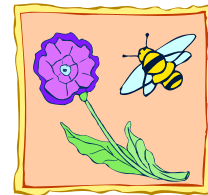
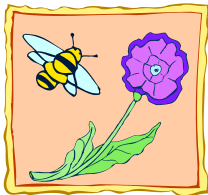
Emergency Contact _____

Any Medical Conditions or Allergies? _____

Anything else we need to know about your child? _____

Please circle the days you wish to reserve for your child(ren).

Deposit equal to the first week of attendance is required to reserve days.



MARCH				
Monday	Tuesday	Wednesday	Thursday	Friday
26	27	28	29	30

The dates you've indicated above are now reserved for your child. Payment is required for child. Payment is required for all days reserved even if your child is unable to attend. No refunds on non-used days. You may reschedule a sick day. If you agree to these terms please initial here: _____

I hereby give permission for my child's picture to be used by Discovery Gymnastics for promotional purposes such as advertising or on the Discovery web site (www.discoverygym.com) please initial _____

I am aware that participation in gymnastics involves risks and possible injury. By the very nature of the activity, gymnastics and other sporting activities carry a risk of physical injury. No matter how careful the student and staff are, no matter how many spotters are used, no matter what height is used or what landing surface exists, the risk cannot be eliminated. I understand that Discovery Gymnastics and its staff will assume no responsibility for injuries or medical expenses incurred by my child or myself. My child and/or I have no physical, mental or emotional problems that would interfere with participation in this program.

Signature _____

To insure your child's spot, please have sign-up sheet and deposit into the office as soon as possible.

(Deposit is equal to 1st week of camp)

\$20.00 a day for 1 or 2 days per week.

(\$18.00 for 2nd or 3rd child)

\$17.00 a day for 3 or more days a week

(\$15.00 for 2nd or 3rd child)

Please bring a sack lunch!!!