



2014 Summer Gymnastics Camp



Begin here, go
anywhere

Phone: 651-768-0090
Website:
www.greatnotherngymnastics.com

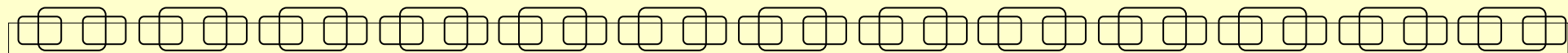
Great Northern Gymnastics
900 Third St.
St. Paul Park, MN 55071

SUMMER GYMNASTICS CAMP REGISTRATION

Last Name: _____ Email Address: _____
Parent's Name: _____ Hm. Ph: _____ Cell: _____
Parent's Name: _____ Hm. Ph: _____ Cell: _____
Address: _____ City: _____ Zip: _____
Emergency Contact Name: _____ Cell: _____

Waiver: The child(ren) registered on this form have my permission to participate in a class/activity at Great Northern Gymnastics (GNG). I am aware there are risks involved and serious injury may result with improper conduct of this activity. I have instructed my child to follow all directions. I give permission to GNG and/or an appropriate medical facility to make whatever emergency measures judged necessary for the care and protection of my child while under the supervision of GNG. In case of medical emergency, I understand that my child will be transported to an appropriate medical facility by the local emergency unit for treatment if the local emergency resource deems it necessary, and that my child will be transported at my expense. It is understood that in some medical situations, the GNG staff will need to contact the local emergency resource before the parent and/or other adult acting on the parent's behalf. I fully disclaim, waive and discharge GNG, their instructors and directors from all claims with regard to any personal injury that may be incurred by my child during any GNG activity. I also understand GNG retains the right to use any photos, videos or other record of this event for publicity, advertising or any legitimate purpose.

Parent/Guardian Signature: _____ Date: _____



Come Join the Fun!

Great Northern Gymnastics summer camp offers FUN, SAFE and QUALITY gymnastics instruction.

The typical camp day will include gymnastics as well as other fun activities such as group games and crafts.

Your child will learn gymnastics skills, gain flexibility, balance and develop better coordination. They will build friendships and self-confidence.

**Camp Dates: Week 1 July 14th-17th
Week 2 August 25th-28th**

**Morning: 9am -12:30pm
Afternoon: 1pm-4:30pm**

For boys & girls ages 5+

**Monday-Thursday (4-day camp)
\$120 half day (\$35/half day)
\$200 full day (\$50/day)**

A Typical Day at Camp

Subject to change

9:00-9:15am	Drop off & open gym
9:15-10:15	Warm up & Event Rotations
10:15-10:30	Snack Break (*brought from home)
10:30-11:30	Gym games, Gymnastics, or Fitness Fun
11:30-12:30	Craft/Coloring
12:30-1:00	Lunch (*brought from home-full-day campers only)
1:00-1:15	Drop off & open gym
1:15-2:15	Warm up & Event Rotations
2:15-3:15	Gym games or Fitness Fun
3:15-3:30	Snack Break (*brought from home)
3:30-4:30	Open gym

Registration Procedures

You may register at any time in person or by mail.

Payment is required with this form to reserve your child's place in camp.

The registration form is due with full payment at least one week prior to the start of camp.

****Minimum of 5 students are required to run a session****

Please bring any special health concerns or conditions to your instructor's attention.

Sign-up Form

Sign up for: Student #1	AM	PM	Both
<input type="checkbox"/> Monday July 14th	\$35	\$35	\$50
<input type="checkbox"/> Tuesday July 15th	\$35	\$35	\$50
<input type="checkbox"/> Wednesday July 16 th	\$35	\$35	\$50
<input type="checkbox"/> Thursday July 17 th	\$35	\$35	\$50
<input type="checkbox"/> Monday August 25 th	\$35	\$35	\$50
<input type="checkbox"/> Tuesday August 26 th	\$35	\$35	\$50
<input type="checkbox"/> Wednesday August 27 th	\$35	\$35	\$50
<input type="checkbox"/> Thursday August 28 th	\$35	\$35	\$50

Name _____

DOB _____ M/F

Notes: _____

Total Tuition Due Student 1 \$ _____

Sign up for: Student #2	AM	PM	Both
<input type="checkbox"/> Monday July 14th	\$35	\$35	\$50
<input type="checkbox"/> Tuesday July 15th	\$35	\$35	\$50
<input type="checkbox"/> Wednesday July 16 th	\$35	\$35	\$50
<input type="checkbox"/> Thursday July 17 th	\$35	\$35	\$50
<input type="checkbox"/> Monday August 25 th	\$35	\$35	\$50
<input type="checkbox"/> Tuesday August 26 th	\$35	\$35	\$50
<input type="checkbox"/> Wednesday August 27 th	\$35	\$35	\$50
<input type="checkbox"/> Thursday August 28 th	\$35	\$35	\$50

Name _____

DOB _____ M/F

Notes: _____

Total Tuition Due Student 2 \$ _____