

First Coast Gymnastics Summer Camp

Gymnastics Games Art & Crafts
Tumbling Trampoline
FUN

REGISTRATION FORM

For ages 5 -12

Camp Hours: 9a.m.-3p.m.

Drop off: 8:30a.m.-9a.m.

Daily camp, Half day camp available

Full Day/weekly: \$ 160.00 week

Daily: \$ 40.00

Half Day/weekly: \$ 90.00 week

Half Day: \$ 25.00

Hourly: \$9.00/under 3 hours

Child's Name _____ D.O.B. _____ M F

Address: _____ City: _____ Zip: _____

Parent's Name _____

Contact Phone 1) _____ 2) _____

Emergency Contact _____ Phone _____

My signature authorizes the staff at First Coast Gymnastics to act for me according to their best judgment in any emergency requiring medical attention. I hereby waive and release the camp from any and all liability for any injuries or illnesses incurred while at the camp. I understand that participation in gymnastics and general camp activities carries with risk of injury or death.

All medical expenses incurred will be the responsibility of the camper's family. In lieu of medical certificate signed by a medical doctor, I have no knowledge of any physical or mental impairment that would be affected by the named camper's participation in the camp program. The camp is not responsible for personal items that are lost, stolen, or damaged. I also understand the camp retains the right to use any photographs, videotapes, motion picture recording or any other record of this event for publicity, advertising, or any legitimate purpose.

Signature: _____ Date: _____

Amount Paid: _____

Check #: _____ Cash: _____

Payments by check will be accepted 10 days advance of the first day of camp. After that day we accept cash. Sorry, no credit card. NO REFUNDS*

Campers should bring a lunch and snack for each day. We provide water.
Please notify us of any food allergies.

Child's Name: _____

Circle all that apply:

Full Day Camp	Per Day Camp	Weekly Half Day	Half Day Camp
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Camp Dates (circle all that apply):

Session 1	Session 2	Session 3	Session 4	Session 5
June 5 - 9	June 12 - 16	June 19 - 23	July 17- 21	July 24 -28
MTWTF	MTWTF	MTWTF	MTWTF	MTWTF

For office use only:

Sessions #: _____

Days: _____

Hours: _____