



## 2010 Summer Camp Registration Form

### GYMNAST INFORMATION

Last name \_\_\_\_\_ First \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_ Age / Grade \_\_\_\_\_ M F

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

### PARENTS and/or GUARDIANS

Mothers Name \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Fathers Name \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

### CAMP REGISTRATION

**\$ 90.00 per week  
or choose  
One Day \$ 25.00  
Two Days \$ 48.00  
Three Days \$ 70.00**

10% Discount for siblings of same family. Each camp is four days a week (Mon – Thu) from 12:30 – 4:00 p.m. and offers gymnastics lessons, sport activities, games, arts and crafts. Please bring your own snack/lunch, leotard or short and t-shirt, clothes & shoes for outside play.

### PROGRESSIVE GIRLS/BOYS (4 – 12 years)

___ <b>Week One</b>	June 14 – 17, 2010	or choose:	Mon	Tue	Wed	Thu
___ <b>Week Two</b>	June 21 – 24, 2010	or choose:	Mon	Tue	Wed	Thu
___ <b>Week Three</b>	July 5 – 8, 2010	or choose:	Mon	Tue	Wed	Thu
___ <b>Week Four</b>	July 12 – 15, 2010	or choose:	Mon	Tue	Wed	Thu
___ <b>Week Five</b>	July 19 – 22, 2010	or choose:	Mon	Tue	Wed	Thu
___ <b>Week Six</b>	July 26 – 29, 2010	or choose:	Mon	Tue	Wed	Thu
___ <b>Week Seven</b>	August 2 – 5, 2010	or choose:	Mon	Tue	Wed	Thu
___ <b>Week Eight</b>	August 9 – 12, 2010	or choose:	Mon	Tue	Wed	Thu

### EMERGENCY INFORMATION – If my child becomes ill or injured and I cannot be reached please call:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Health Insurance \_\_\_\_\_ Policy No. \_\_\_\_\_

Please list or explain any immediate health or physical situation we should take special consideration of:

Allergies and/or Medications: \_\_\_\_\_

### WAIVER AND RELEASE

Realizing that the activity for which I am making this application involves a certain amount of risk to me/my child, I hereby agree to assume all such risk or loss, damage or injury to the person and property of my child and to release and indemnify Dynamics Gymnastics and the agents and employees, from any and all claims from such loss, damage or injury sustained by me/my child while engaging in such activity. All campers must be covered by their own medical insurance. I also understand Dynamics Gymnastics Camp retains the right to use any photographs, videos or other advertising for legitimate purpose. For more information, contact Dynamics Gymnastics at (952) 808-0275 or online at [www.DynamicsGym.com](http://www.DynamicsGym.com)

Parent or Legal Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

1. Complete and sign registration form
2. Make Checks Payable to **DYNAMICS GYMNASTICS CENTER**
3. For Credit Card Payment provide:

Name on Card: \_\_\_\_\_

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Registration Form and payment due one week prior to start of camp