1 GOLD MEDAL GYMNASTICS INC.

Summer Camp 2017 Registration Form

Participant Information

First & Last Name				Male Female
Age Birth Da	te: month		day	year
Address		City		Postal Code
Home Phone #	Allergies	Me	dications	
Has the participant being en	rolled in gymnastics before?			
If Yes, Where?		What Level?		

Parent/Guardian Information

First Name	_ Relationship
Emergency/Cell Phone #	
E-mail Address	

Please select the week(s) and the program you are interested in:

□ Week 1 (July 17-21)	□ Full Day: 9:00-4:00	Half Day: 9:00-12:00
Week 2 (July 31-August 4)	☐ Full Day: 9:00-4:00 ☐ Full Day: 9:00-4:00	□ Half Day: 9:00-12:00 □ Half Day: 9:00-12:00

Note: You have to register for at least a week (5 days) throughout the summer camp! You can pick the days in different weeks if you want. Registration for less than 5 days will not be accepted!

Fees

- Full days: \$225.00/week or \$45.00/day (plus 13% HST)
- Half days: \$175.00/week or \$35.00/day (plus 13% HST)
- Before/After Care: \$2.50/half hour

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Registration/Membership Fee

\$30.00 non-refundable annual fee for membership and Gymnastics Ontario insurance is required with your registration. This will cover the period from July 1st 2017 to June 30th 2018. Please let us know if you paid the G.O. insurance fee somewhere else this year: _____ Where?_____

Method of Payment

Cash _____

Refunds

> Available only up to 2 weeks prior to the start of your selected day(s). \$20.00 service charge applies to all refunds.

Gym Policies

- > Do not enter the gym without coach supervision
- > Food and drinks are not allowed in the gym (water only);
- Street shoes must be removed and left in the front lobby;
- > We operate a "peanut/nut free environment".

Waiver & Release of Liability

There is a potential risk for injury involved in training or participation in gymnastics like in any sport. This is to be read & signed by the parent/legal guardian of all participants under the age of eighteen. Your child may not commence gymnastics lessons until this document is signed.

In part consideration of the Gold Medal Gymnastics Inc, (the Club) permitting my child to take part in the lessons and other activities of the Club, I hereby release the Club and its employees, agents and volunteers from any and all damages sustained in consequence of loss, injury or damage to any person or property and from any or all actions, causes of action, claims and demands of any nature arising directly or indirectly from my child's participation in gymnastics.

From time to time pictures of participants are taken to be used for progress reports and publicity purposes.

The undersigned acknowledges, understands and agrees to this waiver and release of liability in favor of the Gold Medal Gymnastics Inc., Its employees, agents and volunteers.

Signature____

Date_