



Summer Camp Registration 2011

Student Information

Name _____ Sex M F Age _____ DOB / / _____

Medical Conditions _____ Food Allergies _____

Who is authorized to pick up child from camp? _____

Who is **NOT** authorized to pick up child from camp? _____

Parent Information

Mom's Name _____ Place of Business _____ Phone _____

Dad's Name _____ Place of Business _____ Phone _____

Home Address _____ City _____ State _____ Zip _____ Email _____

Home Phone () _____ Cell Phone () _____ Emergency Contact (Name/Number) _____

How did you learn about West Side Gymnastics? _____

Gymnastics Mini Camps

Ages 4 & Up
10:00 am - 2:00 pm
(8 children minimum for camp to be held)

PLEASE CHECK THE CAMPS BELOW THAT YOUR CHILD WILL BE ATTENDING

- | | |
|--|---|
| <input type="checkbox"/> Pirate Camp (Wed.June22) | <input type="checkbox"/> Safari: Outback Ray's Amazing Animals (Wed.July20)
\$5 additional charge |
| <input type="checkbox"/> Knights & Princess Camp (Wed.June29) | <input type="checkbox"/> Beach Party Camp (Wed.July27) |
| <input type="checkbox"/> Disney/Pixar Cars Camp (Wed.July6) | <input type="checkbox"/> Rock Star Camp (Wed.August3) |
| <input type="checkbox"/> Splish Splash Camp (Wed.July13) | <input type="checkbox"/> Wild West Camp (Wed.August10) |

Please pack a lunch for each camp your child attends.
We will be taking a lunch break.

Camp Pricing

- ★ \$40 per child
 - ★ \$25 per sibling
 - ★ \$5 discount per family if paid 2 weeks before camp
- Add \$5 for Outback Ray's Amazing Animals

Camp fees are refundable up to 1 week before the date of the camp, minus a \$5 processing fee.

Payment

Add \$5 for Outback Ray's Amazing Animals

of Camps ___ at \$40 (or \$35 for payment 2 wks prior) = _____

of Camps ___ at \$25 per sibling; # of siblings _____ = _____

Total \$ = _____

*Make Checks Payable to: West Side Gymnastics



Camp fees are refundable up to 1 week before the date of the camp, minus a \$5 processing fee.

Waiver Agreement/Release

I understand and fully appreciate that the sport of gymnastics involves certain inherent risks and is a hazardous sport. I further understand and appreciate that the inherent risks in the sport of gymnastics include, without limitation, risk of bodily injury. I hereby, for myself, my heirs, executors, administrators, and assigns, waive and release any and all rights and claims for damage I have against West Side Gymnastics Club, Inc., their agents, representatives, successors, and assigns for any and all injuries and losses suffered by me and mine in connection with West Side Gymnastics Club, Inc.. Additionally, West Side Gymnastics Club, Inc., has my permission to render any necessary first aid emergency treatment to my child while in attendance at West Side Gymnastics Club, Inc., or any of their functions.

CAUTION: READ BEFORE SIGNING. Signature hereon acknowledges that the undersigned has read and fully understood the terms and conditions set forth above and voluntarily agrees to those terms and conditions.

Signature _____ (Parent or Guardian)

Photo/ Release Form

Occasionally, West Side Gymnastics Staff may photograph students with the intent of using the pictures in various publications and/or on our website (www.westsidegymnastics.net). **Non-response** to this request will indicate that you **grant** permission as indicated below.

I grant _____ do not grant _____ permission for photographs of my son/daughter to be used in various publications and website for as long as my child (ren) is enrolled at West Side Gymnastics Club, Inc..

Please print name (s) of children enrolled

Date: _____

Please print name of parent or guardian

Signature of parent or guardian