



## North Valley Gymnastics

20815 N. 28th St. Phoenix, AZ 85050 602-404-FLIP (3547) www.northvalleygymnastics.com

Gymnastics \* Tumbling \* Trampoline \* Games \* Water Slide \*AND Much More!!

Camper's Name:	Home Phone:
Family Name:	Cell Phone:
Email(required):	

\*\*\*\* A Registration and Waiver Form must be filled out at time of Registration (back of this form) \*\*\*\*\*

Registration Fee		FULI CAI			HALF DAY CAMP			
\$20 per Camper		(Ages 5–12) \$85/Day \$375/Week  Drop In Rate \$90/Day			(Ages 4–12) \$55/Day   Drop In Rate \$250/Week   \$60/Day			
	Dalamas	Harrina			11.			

Session	Dates	Balance Due Date	Hours (9am – 4:00pm) <i>Circle Days</i>			Hours (9am–12pm) or (1pm-4p Circle Days				pm)		
1	May 28 – May 31	May 1st		Tu	W	Th	$\mathbf{F}$		Tu	W	Th	F
2	June 3 – June 7	May 1st	M	Tu	W	Th	F	M	Tu	W	Th	F
3	June 10 – June 14	May 1st	M	Tu	W	Th	F	M	Tu	W	Th	F
4	June 17 – June 21	May 1 <sup>st</sup>	M	Tu	W	Th	F	M	Tu	W	Th	F
5	June 24 – June 28	June 1st	M	Tu	W	Th	F	M	Tu	W	Th	F
6	July 8 – July 12	June 1st	M	Tu	W	Th	F	M	Tu	W	Th	F
7	July 15 – July 19	June 1st	M	Tu	W	Th	F	M	Tu	W	Th	F
8	July 22 – July 26	June 1st	M	Tu	W	Th	F	M	Tu	W	Th	F
9	July 29 – August 2	June 1st	M	Tu	W	Th	F	M	Tu	W	Th	F



\*\*\*\* Morning Snack and Drink will be provided. Full Day Campers must bring a sack lunch. \*\*\*\*\*



## **PAYMENT and CAMP POLICIES**

Camp registration can be submitted on-line at <a href="www.northvalleygymnastics.com">www.northvalleygymnastics.com</a>, in person, by mail or by email. All applicable Registration Fees along with a \$50.00 <a href="non-refundable">non-refundable</a> deposit is due <a href="person">per Child</a> to hold your spot. The registration fee and deposit is due at the time of registration. The remaining balance must be paid by the due date listed above. If fees are not paid by the due date, we reserve the right to drop your child(ren) from the camp sessions they are registered in. There will be no refund of any deposits paid.

- All Campers must be completely potty trained and must have the ability to use the restroom facilities independently.
- Drop-In rate applies to any registrations that occur during the actual week of camp.
- There will be no make-ups or refunds for missed days.
- Our Discipline Policy is as follows: 1st=Warning, 2nd=Sit Out, 3rd= Call to be Picked Up
- Parents are responsible for applying sunscreen for their child prior to camp. North Valley Gymnastics staff will not apply sunscreen.
- A registration and waiver form (backside of this form) must be completed at time of registration.

Parent Signature	Date	



## **REGISTRATION and WAIVER Form**

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Mother's Name:		Cell Phone:			
Father's Name:		Cell Phone:			
Home Address:		Home Phone:			
City/State/Zip:					
Email Address:					
Student's Name:	F / M	Age:	Birthdate:	/	_/
Student's Name:	F / M	Age:	Birthdate:	/	_/
EMERGENCY & MEDICAL INFORMAT	<u>ION</u>				
Contact Name:			Phone #:		
Any Medical Conditions to be aware of:		<del> </del>			
Known Allergies:		Medications: _			
I understand that it is the express intent of North Valle my child to use this facility, I hereby forever waive an and independent contractors from all liability for any a North Valley Gymnastics.  I confirm that the above named student(s) are in good by participation in any North Valley Gymnastics progincurred by my child while training at, or performing and Medical Release: I hereby give my consent to North immediate aide as might be required at the time for his	nd release North Valley Gymnas and all damages and injuries suf health and have no known phys gram. I also agree to individuall for North Valley Gymnastics. Valley Gymnastics to provide e	tics, its officers, entifered by my child visited impairments the ly provide for the p	nployees, instructors, dir while under the instruction at would cause harm to assible future medical ex	rectors, coache on, supervision the above nan xpenses which	es, landlord, n, or control of med student(s) n may be
<i>Image Release:</i> I hereby give my consent to North V internet, for advertisement and promotional purposes.		ld's image in any fo	orm of media, including	print, televisio	on, and
COVID-19: The novel coronavirus, COVID-19, has be nature of COVID-19 and voluntarily assume the risk to Gymnastics and that such exposure or infection may rebecoming exposed to or infected by COVID-19 at Norincluding, but not limited to, North Valley Gymnastics of the foregoing risks and accept sole responsibility for death), illness, damage, loss, claim, liability, or expensite at North Valley Gymnastics. On my behan North Valley Gymnastics, its employees, agents, and responses of any kind arising out of or relating thereto.	that my child(ren) and I may be result in personal injury, illness, th Valley Gymnastics may result employees, volunteers, and proor any injury to my child(ren) or ase, of any kind, that I or my child(ren) and on behalf of my child(ren) representatives, of and from the	exposed to or infec permanent disabili It from the actions, o gram participants myself (including, Id(ren) may experie n), I hereby release,	ted by COVID-19 by attity, and death. I underst omissions, or negligence and their families. I vol but not limited to, personce or incur in connecticovenant not to sue, dis	ending North tand that the ri e of myself and funtarily agree onal injury, dis ion with my ch scharge, or ho	Valley isk of d others, e to assume ali ability, and ild(ren)'s ld harmless
As legal parent or guardian of the student(s) is waiver and release and furthermore I permit					
I HAVE READ AND FULLY UNDERSTA	ND ALL INFORMATIO	N ABOVE.			
Parent or Legal Guardian Printed Name	Parent or Legal C	Guardian Signature		Date	-