



GYMNASTIC ACADEMY OF BOSTON

Summer Camp 2010 Registration Form

Camper's Information	Name: _____ <small style="margin-left: 100px;">Last, First</small> Birth Date: _____ Age: _____ Gender: M <input type="checkbox"/> F <input type="checkbox"/>
Camper's Legal Guardian Information	Name: _____ <small style="margin-left: 100px;">Last, First</small> Address: _____ City: _____ State: _____ Zip: _____ Work Phone: _____ Parent Cell 1: _____ Home Phone: _____ Parent Cell 2: _____ Email: _____

	<u>Camp Times</u>	<u>Daily Price</u>	<u>Weekly Price</u>
Prices	Morning 9:00am - 12:15pm	\$40	\$175
	Full Day 9:00am - 3:30pm	\$70	\$280
	Extended Day 8:00am - 6:00pm	\$85	\$310
	Working Parent Special		
	Summer Registration Fee (waived for current members)		\$20

<u>Camp Week</u>	<u>Days</u>	<u>Hours</u>	<u>\$ Due</u>
Week 1 June 21-25	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 2 June 28-July 2	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 3 July 5- 9	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 4 July 12-16	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 5 July 19-23	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 6 July 26-30	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 7 Aug.2-6	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 8 Aug. 9-13	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 9 Aug. 16.20	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 10 Aug. 23-27	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____
Week 11 Aug. 30-Sept 3	Week __ M__ Tu__ W__ Th__ F__	Full Day__ ½ Day__ Ext. am__ pm__ WPS__	\$ _____

Registration Policy

There are NO REFUNDS given once you have turned in this Registration form with your payment. Registrations will not be processed without payment. You may change the week your camper is enrolled on a space available basis only.

Office Use Only

Date Received _____ Date Paid _____ Payment Type _____ Amount Paid _____

Packet Sent Packet Received