

“April Vacation Camp at GAB is always a fun and exciting time!”

Welcome to the
Gymnastic Academy of
Boston’s April
Vacation Camp

program, offering your
child healthy, challenging
fun. For boys and girls of
all levels, ages 3 and old-

er. Our experienced and friendly staff are
here to give your child a fun learning gym-
nastic experience.

All campers should bring a healthy
snack and gymnastics/fitness clothing.
Full day campers should also bring a lunch.



**APRIL VACATION
CAMP**

Phone: 978-369-9034
GymnasticAcademyofBoston.com



APRIL VACATION CAMP

April 15-19, 2024

**GYMNASTIC ACADEMY OF BOSTON
The Leader in Children’s
Fun & Fitness for Over 40 Years!**



CAMP HOURS

Morning Session 9:00 – 12:00
Afternoon Session 12:30 – 3:30
Full Day Session 9:00 – 3:30

GYMNASTIC ACADEMY OF BOSTON-ACTON
12 Keefe Road, Acton, MA 01720
Phone (978) 369-9034
GymnasticAcademyofBoston.com

CALL AND RESERVE YOUR SPOT TODAY.

**Hurry, Space is very
Limited!**

This camp must comply with regulations of the
Massachusetts Department of Public Health and be
licensed by the local Board of Health.

CAMP ACTIVITIES



PRESCHOOL CAMP ACTIVITIES:

Gymnastic Classes...Moonwalk...Trampoline
Tumble Trak...Foam Pit...Arts & Crafts
Sports Skills...Games

GRADE SCHOOL ACTIVITIES:

Gymnastic...Tumbling & Trampoline
Parkour Setups...Team Building Games
Sports Skills and Exercises

What to Bring:

All campers should bring a healthy snack.
Full day campers should also bring a lunch.

***Siblings get 20% off!**



Please call us if you have any questions.

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GAB-Acton Acknowledgment of Risk and Waiver of Liability

As an adult student and/or as the parent or legal guardian of all child students listed above, I hereby give permission for my child(ren) and/or myself to participate in programs at Gymnastic Academy of Boston-Acton, LLC. I recognize that gymnastics, tumbling, parkour and ninja training are sports that involve inflatables, height and rotation of the body and there are inherent risks involved. There are also inherent risks to my being on the premises, as either an adult student or simply as a non-student parent or guardian, during such activities. These risks also specifically include the additional risk of being exposed to and/or contracting COVID-19 or other illness. On behalf of myself and my child(ren), I agree to waive all claims (including for negligence) against and agree not to sue Gymnastic Academy of Boston-Acton, LLC, or its owners, directors, officers, employees, staff and instructors for any liability, loss, cost, damage, medical expense, long-term care or emotional distress arising out of any personal injury, including total injury, paralysis and death, and including exposure to or contracting COVID-19 or other illness, which may occur to myself or any of my children while on the premises of or under the instruction, supervision, or control of Gymnastic Academy of Boston-Acton, LLC. I hereby testify to my and my child's sound health of mind and body and I authorize Gymnastic Academy of Boston-Acton, LLC, to seek medical treatment at the nearest medical facility for myself and my child in case of emergency or injury.

I have read and understand the above terms and agree to the Risk & Waiver of Liability.

Signature of Parent or Legal Guardian:

Date _____



Registration Form

Mon	Tues	Wed	Thurs	Fri	Session/Time	Daily / Weekly
					Morning (9:00-12:00)	\$62 / \$281
					Afternoon (12:30-3:30)	\$60 / \$266
					Full Day (9:00-3:30)	\$117 / \$500

Method of Payment:

Check # _____

Cash

Credit Cards

Total Due _____

Amt. Paid _____

Child's Name _____ Age _____

Child's Name _____ Age _____

Parent's Name & Address _____

Cell Phone # _____

Emergency Contact _____

Emergency Contact's Cell # _____

Participants must be 3 yrs old and potty-trained.



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