



95 Vanderbilt Ave. Norwood, MA 02062
781-769-6150 ~ gabnorwood@comcast.net



2017 GYM and SWIM Camp Registration

Our campers enjoy gymnastics, swimming in the pool in our own back yard,
fun arts and crafts along with lots of great indoor and outdoor games!

Full Day Camp: 9:00 a.m. - 3:30 p.m. Cost: \$75.00 per day

***Half Day Camp: 9:00 a.m. – 12:00 p.m. Cost: \$45.00 per day**

* Children 3-1/2 years to 5 years old (potty trained) would be perfect for our half day preschool camp.

Extended Morning: 7:30 a.m. – 9:00 a.m. Cost: \$10.00 per day

Extended Afternoon: 3:30 p.m. – 5:00 p.m. Cost: \$10.00 per day

Summer Registration fee (waived for current members) \$20.00

Campers Name: _____ Age: _____ D.O.B: _____ Gender: M__ F__

Parent 1: _____ Parent 2: _____

Address: _____ City: _____ Zip: _____

Phone 1: _____ Email 1: _____

	CAMP WEEK	M	T	W	TH	F	HALF DAY	FULL DAY	EXT AM	EXT PM	TOTAL
1	June 26 – June 30										
2	July 3 - July 7	x	x								
3	July 10 - July 14										
4	July 17 - July 21										
5	July 24 - July 28										
6	July 31 - Aug 4										
7	Aug 7 - Aug 11										
8	Aug 14 - Aug 18										
9	Aug 21 - Aug 25										
10	Aug 28 - Sept 1										

Total Amount Due: _____ **Check/Credit Card:** _____ **Date:** _____

Acknowledgment of Risk and Waiver of Liability As the parents or legal guardians of _____, we hereby give permission for our child to participate in programs at Gymnastic Academy of Boston/Gymnastic Academy. We recognize that gymnastics is a sport that involves height, rotation of the body and inflatables, and there are inherent risks involved. On behalf of our child and on our own behalf, we agree to waive all claims against Gymnastic Academy of Boston/Gymnastic Academy and its owners, 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 disability, paralysis and death, which may occur to any of our children while on the premises of or under the instruction, supervision, or control of Gymnastic Academy of Boston. We hereby testify to our child's sound health of mind and body and we authorize Gymnastic Academy of Boston to seek medical treatment at the nearest medical facility in case of emergency. We have read and understand all the above and agree to the above terms, including the Waiver of Liability. **Signature of Parent the legal Guardian:** _____ **Date:** _____

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. Charges may apply!

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