

Registration Form - Summer Camps 2014

Please read our gym rules and policy PRIOR to registration! We reserve the right to cancel the camps if there is low or no registration. Please circle the desired week and time.

Days	Time and Age Group	COST		
JULY 7 -11	9.30-12.00 , (3 ½ y+)			
JULY 14-18	9.30-12.00 (3 ½ y +)			
AUGUST 11-15	9.30-12.00 (3 ½ y +)			
AUGUST 18-22	9.30-12.00 (3 ½ y +)			
INSURANCE GBC				
TOTAL				

COST (all taxes are included, **cash or cq**): -- \$85.00/week/child

Note: "week" means 5 consecutive days as shown above in the table.

NEW MEMBERS: In addition to camp fee add \$10/child for Summer Insurance GBC and membership altogether!

We will incorporate lots of gymnastics and fun in the gym and snack, craft and games in Birthday Party room. Please send kids with comfortable clothes and healthy snacks (no pop, candy or gum)!! We reserve the right to cancel the camps if there is low or no registration.

Child's Name		Child'	s First Name		
Birthdate (Y/M/D)	Age	M/F ,	Home Phone _		
Address	City _			Postal Code	
Medical condition/Allergies		Email	l		
Parent/Guardian		Relati	ionship	Cell	
Signature of Parent/Guardian				Date	

FOR OFFICE USE ONLY: PAID \$