

AMERICAN GYMNASTICS 2010 1/2 DAY SUMMER CAMP AND/OR GYMNASTIC CLASS

REGISTRATION FORM

Student Name _____ M/F _____ Birthdate _____ Age _____ Phone _____

Address _____ City _____ State _____ Zip _____ EMGNCY# _____

Mother's Name _____ Mother's cell# _____ Father's Name _____ Father's O/Cell# _____

Payment in FULL for Summer Camp/ Classes due by June 1. (We recommend early registration!)

1/2 DAY MORNING SUMMER CAMP

Please write days (MWF, TTH, M-F)

Week 1 - July 6-July 9 _____

Week 2 - July 12-July 16 _____

Week 3 - July 19-July 23 _____

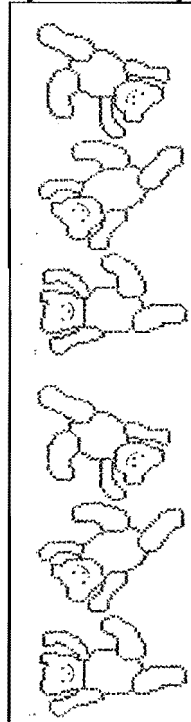
Week 4 - July 26-July 30 _____

Week 5 - August 2-August 6 _____

Week 6 - August 9-August 13 _____

Week 7 - August 16 -August 20 _____

Cost is \$35.00 per day



Also available...



**Gymnastics & Dance
Camp
Ages 6 - 13**

I understand that I am registering my child for summer camp/summer class(es) at American Gymnastics and assume responsibility for making the appropriate payments and I agree to the foregoing. My payment is due as stated prior to class. A charge of 10% will be assessed against payment not received within 10 days of the due date and, a \$20.00 fee against all returned checks. Students will not be allowed to participate in subsequent classes unless all fees have been paid. Please make checks payable to: American Gymnastics 317 Railroad Avenue Bedford Hills, New York 10507 (914) 241-1997. All payments are non-refundable. I hereby release American Gymnastics and their employees from claims on any injuries which may be sustained while participating in gymnastics. I understand and recognize that any activity involving height or motion can create a possibility of injury.

Signature _____ Date _____

A NON-REFUNDABLE REGISTRATION FEE OF \$35.00 (\$60/Family) IS DUE AT THE TIME OF REGISTRATION.