

★Gymstars★
2017 Holiday Tumbling Camp
New Students Registration Form

Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

E-Mail _____

Current Cheer Squad _____ (if applicable)

Please Check (v) Camp Options:

- _____ **Mon. Dec. 18- 2:30 -4:30**
- _____ **Tues. Dec. 19 - 2:30-4:30**
- _____ **Wed. Dec. 20 - 2:30-4:30**
- _____ **Thurs. Dec. 21 - 2:30-4:30**
- _____ **Fri. Dec. 22 - 2:30-4:30**
- _____ **Break for Christmas**
- _____ **Wed. Dec. 27 - 2:30-4:30**
- _____ **Thurs. Dec. 28 - 12:30-2:30**
- _____ **Fri. Dec. 29 - 12:30-2:30**

Please check (v) Payment Options:

- _____ **Pay for 3 days - \$65**
- _____ **Pay for 5 days - \$100**
- _____ **Pay for all 8 days - \$150**
- _____ **Daily rate is \$25 per day** _____ **days X \$25 = \$** _____

Enclosed is payment of \$ _____ - Check # _____ Debit/CC # _____

Permission form & waiver:

I hereby waive and hold harmless Gymstars Gymnastics Center, it's teachers, staff, paid or volunteer- from any injury claims for damages in connection with the gymnastics and cheer program and/or other activities related to Gymstars Gymnastics Center. I further understand the risk involved in any athletic activity and will assume responsibility in case of an accident. I hereby consent and wish to have myself or my child/children actively participate in any function at Gymstars Gymnastics Center. I understand this is a structured program supervised by Gymstars Gymnastics Center.

Signature of Parents

Date