

2020 Summer Day Camp Registration Form May 26th – July 31st



435 Washington St. Suite 102 Collierville, TN 38017 901-861-8468

Member Returning Camper		Non-Member New Camper		
Full Day (9am-4pm):	½ Day (9-12	2:30) o	r (12:30-4)	
Full Day with Extended Care (7:30	9-6):			
Camper's Name:	Sex:	DOB:	Grade:	
Sibling Name:	Sex:	DOB:	Grade:	
Sibling Name:	Sex:	DOB:	Grade:	
Home Phone: E-r	mail:			
Address:	City:	State:	_ Zip:	
Referred by:				
Mother's Name:	Work Phone:	(Cell:	_
Father's Name:	Work Phone:		Cell:	_
Emergency Contact:	Em	ergency Numbe	r:	
 Registration Policies: Plea Return Check Policy: \$30 se Refund Policy: No refunds of Pick up Policy: Campers mucare) or you will be charged and \$1 every minute after the Swap Policy: Swapping or swathe camp you are switching to not attend the days enrol weeks/days committed to or Payment Policy: Payment is will result in a \$10 late fee. *Must sign Medical 	rvice charge on a of Registration fe st be picked up b \$5 for the first m at. This policy wi ritching of days w to and the decision lled, you will still on this form. due on Monday o	Ill return checkes or tuition _ by 4:00 pm (or inute you are ill be strictly e vill only be per on will be left be held finance	ks by 6:00 pm if in late to pick up y nforced!! mitted if there in up to the office cially responsible	our child is room in staff. If you e for

GYMSTARS, LLC REGISTRATION FEES * MEDICAL INFO *ASSUMPTION OF RISK LIABILITY WAIVER * PHOTO RELEASE * MEDICAL AUTHORIZATION

★<u>READ CAREFULLY BEFORE SIGNING</u> ★

Madical	Information:	
iviedicai	i imformation:	

vicaicai imoi macion.		
Emergency contact	Relationship to child	_Phone
Allergies and/or Medical Conditions		
Any medications your child is taking		
DoctorPhone	Preferred hospital	
Medical Insurance Company	Policy or Group #	
referred to as the Gymstars) and in reco	ognition of the fact that certain risl	Class student at Gymstars (from here on ks pertaining to personal injury are inherent and following is expressly agreed and understood by

- 1. Student and undersigned parent(s) or guardian(s) agree and acknowledge (1) that the entire risk of personal injury to the student is assumed by the student and parent(s); (II) that any and all claim, demand, liability or cause of action, whatever, arising out of any such personal injury are waived by the student and parent(s) or guardian(s) and the undersigned release and by the Gymstars who engage and assist in the instruction of gymnastics, dance, and/or cheer, (III)the student and the undersigned parent(s) or guardian(s) will indemnify and hold harmless the Gymstars, and its employees, against, servants and all other persons, firms or corporations of and from any and every claim or demand of every kind or character, which may be asserted by reason of injury; (IV) that the Gymstars, its employees, and all other authorized Gymstar personnel waive any claim may have for personal injury which may cause in whole or part by the student.
- 2. This agreement applies to any and all personal injuries, accidents or events which may occur at any one of more time while the student is enrolled in the Gymstars, including, but not limited to the following: while traveling to and/or from, present at, participating any and all instructional classes, practice sessions, exhibitions, clinics, and/or competitions or events.
- 3. I recognize that severe injuries, including, permanent paralysis or death can occur in sports or activities involving height or motion, these activities including, but not limited to, gymnastics, tumbling, trampoline, acro skills, dance, cheerleading, ball sports. Being fully aware of these dangers, I hereby give consent for my, child(ren) to participate in any and all Gymstar gymnastics programs and activities and I ACCEPT ALL RISKS associated with this participation. In consideration for my or my child(ren) to participate I hereby, for myself and my child(ren) and our respective heirs and successors, PROMISE NOT TO SUE and FOREVER RELEASE Gymstars; It's officers, directors, shareholders, employees, contractors and volunteers, from all liability resulting in damages or injuries incurred as a result of participation including those resulting from acts of negligence.
- 4. I am aware that individual and group publicity photos and videos are taken from time to time and in consideration for my or my child(ren)'s participation. I hereby grant my permission for my child's likeness to be used in Gymstars publicity or advertising.
- 5. In the event of an accident or emergency I hereby authorize my child(ren) to be transported to a hospital for medical treatment and I hold Gymstars and its representatives harmless in the execution of such. Additionally, I hereby agree to individually provide for all medical expenses which may be incurred by me or my child(ren) as a result of any injury sustained while participating at or for Gymstars.
- 6. I understand that if collection becomes necessary, I will be responsible for all collection fees, attorney fees, and/or administrative costs of up to 35%. I will also be responsible for paying all finance charges as well as any and all fees associated with collection.

BY SIGNING THIS AGREEMENT, I/WE ACKNOWLEDGE THAT WE HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND THE INTENT OF THIS AGREEMENT AND AGREE TO BE LEGALLY BOUND BY THE TERMS AS STATED ABOVE.

Parent/Guardian's_	Date	
Employee Signature	Date	2

Week 1 "Safari Week'			7)	Pizza & Ice cream \$5	Y or N
Circle Days Attending					
Before Care: Y or					
				= total due	
				ck#	
				= balance due	
Balance paid =	date paid	ck#		_cc	
Week 2 "Outer Space	Week"- June 1 st - June	e 5 th		Pizza & Ice cream \$5	Y or N
Circle Days Attending					
Before Care: Y or		after care:	Y or	N	
				= total due	
				ck#	
				= balance due	
Balance paid =					
_	_				
Week 3 "Sports Extra				Pizza & Ice cream \$5	Y or N
Circle Days Attending					
Before Care: Y or					
Amount of Camp _	+ before	e/after care		= total due	
Deposit amount =	date paid	l		ck#	
				= balance due	
Balance paid =					
Week 4 "Music Maker	as XX asla?? Tarras 15th	T 10th		Dieno % Ioo amaga \$5	V on N
				Pizza & Ice cream \$5	I Of IN
Circle Days Attending			3 7	NT	
Before Care: Y or					
				= total due	
				ck#	
				= balance due	
Balance paid =	date paid	ck#		_cc	
Week 5 "Superhero/D	isney Week"- June 22	nd – June 26 th		Pizza & Ice cream \$5	Y or N
Circle Days Attending	M T W TH	F			
Before Care: Y or		after care:	Y or	· N	
				= total due	
				ck#	
				= balance due_	
Balance paid =					
	rrain and and	and 010 T 11		D. 0.7	
Week 6 "Party in the l		2 nd (NO Frida	ay)	Pizza & Ice cream \$5	Y or N
Circle Days Attending		_			
Before Care: Y or		after care:			
Amount of Camp _	+ before	e/after care		= total due	
Deposit amount =	date paid	l		ck#	
Total amount					
	deposit	disco	ounts	= balance due	

Payment Information: Name

Week 7 "Circus Week"	'- July 6'''- 10'''			Pizza & Ice cream \$5	Y or N
Circle Days Attending	M T W T	ГН F			
Before Care: Y or	N	after care:			
Amount of Camp _	+ be	fore/after care		_= total due	
				k#	
Total amount	deposit	discou	ınts	= balance due_	
Balance paid =					
Week 8 "Under the Sea	a Week"- July 13 ^{tl}	h – July 17 th		Pizza & Ice cream \$5	Y or N
Circle Days Attending	M T W T	ГН F			
Before Care: Y or	N	after care:	Y or	N	
Amount of Camp _	+ be	fore/after care		_= total due	
Deposit amount =	date]	paid	c	k#	
Total amount	deposit	discou	ınts	= balance due_	
Balance paid =					
Week 9 "Tokyo Olymp Circle Days Attending				Pizza & Ice cream \$5	Y or N
	M T W	ГН Б			Y or N
Circle Days Attending Before Care: Y or	M T W T	ΓΗ F after care:	Y or		
Circle Days Attending Before Care: Y or Amount of Camp _	M T W T N+ be	TH F after care: fore/after care	Y or	N	
Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount = Total amount	M T W 7 N + be date 1	TH F after care: fore/after care paid discou	Y or cl	N _= total due k# = balance due_	
Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount =	M T W 7 N + be date 1	TH F after care: fore/after care paid discou	Y or cl	N _= total due k# = balance due_	
Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount = Total amount	M T W 7 N + be date j date j date paid	after care: after care: after care after care: after	Y orcl	N _= total due k# = balance due_	
Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount = Total amount Balance paid = Week 10 "Summer Fundament Fun	M T W 7 N	after care: after care: after care after care: after	Y or claimts c	N _= total due k#= balance due_ cc Pizza & Ice cream \$5	
Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount = Total amount Balance paid = Week 10 "Summer Function Circle Days Attending Before Care: Y or	M T W T N	TH F after care: fore/after care paid discount ck# y 31st TH F after care:	Y or claimts Y or	N _= total due k#= balance due_ cc Pizza & Ice cream \$5	Y or N
Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount = Total amount Balance paid = Week 10 "Summer Function Circle Days Attending Before Care: Y or Amount of Camp _	M T W T N	TH F after care: fore/after care paid discou ck# y 31st TH F after care: fore/after care	Y orclassC	N _= total due k#= balance due_ cc Pizza & Ice cream \$5 N _= total due	Y or N
Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount = Total amount Balance paid = Week 10 "Summer Function of Camp _ Circle Days Attending Before Care: Y or Amount of Camp _ Deposit amount =	M T W T N	TH F after care: fore/after care paid discount ck# y 31st TH F after care: fore/after care	Y or claims C	N _= total due k#= balance due_ cc Pizza & Ice cream \$5	Y or N