

SCHOOL'S OUT GYMNASTICS CAMP REGISTRATION

BOYS & GIRLS AGES 3 1/2 TO 14 YEARS

Campers will be divided by age and/or skill level. Camps are structured for safe, fun, and effective gymnastics skill progression and development of strength, flexibility, and coordination. Camps use full size olympic apparatus (Floor, Bars, Beam, Vault, Rings, and Pommel Horse) as well as Trampolines, Tumble Trak, and in-ground pits. Younger children will also use specialized pre-school equipment. Camps will also include theme related games, crafts, and OPEN GYM.

STEP 1: Complete Student and Family Information & Sign Release Agreement

New Student Returning PRIMARY /STUDENTS LAST NAME: _____
 Parent/Guardian First Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Home Phone: ____/____/____ Cell Phone: ____/____/____ Other: ____/____/____
 E-Mail: _____
 Child's Name: _____ Birth Date: ____/____/____ Sex: M F
 Medical/Behavioral Issues: _____

STEP 2: Check if student is a member (student is currently enrolled and attending class or team) or Non-member

Member: Full Day = \$60.00; AM or PM only= \$40.00 Non-Member: Full Day = \$70.00; AM or PM only= \$45.00

STEP 3: Pick Camps FULL DAY CAMP: 8:30 to 4:30 AM CAMP: 8:30 to 12:30 PM CAMP: 12:30 to 4:30

<p>SEPTEMBER 2011</p> <p>1. ____ 29th (Thu)</p> <p>____ Full Day ____ AM only ____ PM only</p> <p>Total Sept. Fee: \$ _____ ____ Sibling Disc. 10%</p>	<p>NOVEMBER 2011</p> <p>3. ____ 4th (Fri) 4. ____ 21st (Mon)</p> <p>____ Full Day ____ AM only ____ PM only</p> <p>Total Nov. Fee: \$ _____ ____ Sibling Disc. 10%</p>	<p>DECEMBER 2011</p> <p>5. ____ 27th (Tue) 6. ____ 28th (Wed) 7. ____ 29th (Thu)</p> <p>____ Full Day ____ AM only ____ PM only</p> <p>Total Dec. Fee: \$ _____ ____ Sibling Disc. 10%</p>	<p>JANUARY 2012</p> <p>8. ____ 16th (Mon) 9. ____ 23rd (Mon)</p> <p>____ Full Day ____ AM only ____ PM only</p> <p>Total Jan. Fee: \$ _____ ____ Sibling Disc. 10%</p>	<p>APRIL 2012</p> <p>11. ____ 2nd (Mon) 12. ____ 3rd (Tue) 13. ____ 4th (Wed) 14. ____ 5th (Thu) 15. ____ 9th (Mon)</p> <p>____ Full Day ____ AM only ____ PM only</p> <p>Total Apr. Fee: \$ _____ ____ Sibling Disc. 10%</p>	
<p>OCTOBER 2011</p> <p>2. ____ 21st (Fri)</p> <p>____ Full Day ____ AM only ____ PM only</p> <p>Total Oct. Fee: \$ _____ ____ Sibling Disc. 10%</p>	<p>Summer Camps start June 11th</p> <p>There are no Make ups available for missed School's Out Camp</p> <p>Total Camp Fee: \$ _____.</p>			<p>FEBRUARY 2012</p> <p>10. ____ 20th (Mon)</p> <p>____ Full Day ____ AM only ____ PM only</p> <p>Total Feb. Fee: \$ _____ ____ Sibling Disc. 10%</p>	<p>AM Camp: Please bring Lunch (scheduled for 11:45) NO PAANUT PRODUCTS PM Camp: Please eat before hand</p>

STEP 4 : PICK PAYMENT OPTION - FULL PAYMENT DUE AT REGISTRATION

Payment In Full option For single or multiple Camp Registration Full Payment due with Registration

Amount Pd.: \$ _____ Date Paid: ____/____/____ Cash Payment Check Payment (ck #) _____
 Visa/MC/DC Card #: _____ - _____ - _____ Exp. Date: ____/____ CCVC (last 3 digits on back of card): _____
 Signature: _____

INSTALLMENT PAYMENT OPTION & AGREEMENT: Credit Card Required!

I, _____ understand that the 1st month camp fees are due at time of registration.
 I authorize Rebounders Gymnastics to charge any additional camps I have registered for on a monthly basis.
 I agree to have these camp fee installments charged (1st of the month) to the following credit card:
 V MC DC #: _____ - _____ - _____ Exp. Date: ____/____/____ 3-digit Code: _____

I agree to and understand Rebounders Policies including the following:

1. There are no Refunds for camp installments that have been charged for the month registerd.
2. Any camp cancellations must be received by the 15th prior to the month the installment is due.
3. There is a \$10.00 Camp cancellation fee.

Signature: _____ Date: ____/____/____



STEP 4: ALL STUDENTS: Complete medical form NEW STUDENTS: Complete Family Record Card

REBOUNDERS GYMNASTICS SUMMER SESSION

7-A West Aylesbury Road
Timonium, MD 21093
410-252-3374

CAMP MEDICAL FORM

**PLEASE NOTE: The following information must be completed by the camper's parent/guardian.
NO CHILD WILL BE PERMITTED TO ATTEND CAMP WITHOUT PROPER COMPLETION OF THIS FORM PRIOR TO
THE START OF THE SESSION!
(ANY FORMS NOT FULLY COMPLETED WILL BE RETURNED)**

Camper's Name _____ Girl ___ or Boy ___ Date of Birth ____/____/____
Street Address _____ City _____ State _____ Zip _____
Home Phone # _____ Parent's Work # _____ Cell Phone # _____ Other _____

EMERGENCY INFORMATION

Emergency Contact _____ Relationship to Camper _____ Phone # _____
Physician Name _____ Address _____ Phone # _____

MEDICAL INFORMATION

1. Date of Camper's last Physical Exam _____
2. Medical Insurance Carrier _____ Group # _____ Policy # _____
3. Insurance Carrier Address _____ Phone # _____

4. Does the camper have any allergies to medications, food or environment? No _____ Yes _____ **If yes, please list below:**

5. Does the camper have any medical or physical restrictions? No _____ Yes _____ **If yes, please specify below:**

6. Does the camper suffer from a chronic illness? No _____ Yes _____ **If yes, please explain below:**

**If medication will be required during camp session, medication must be in the original packaging, with original pharmacy prescribing information. A signed medication information form must be filled out before medication can be administered. (Forms are available at camp check-in.)*

7. Does the camper have any physical, cognitive, language, social, emotional and/or sensory difficulties? No ___ Yes ___ **If yes, please explain below:**

IMMUNIZATION INFORMATION

1. Does the camper attend a public or private pre-school, elementary or secondary school in Maryland?
Yes _____ Name of School (**required for attendance**) _____
No _____ (**if, no, see below**) ***

2. Has the camper received the proper schedule of immunizations and boosters? Yes _____ No _____ (**if no, see below**) ***

3. Date of last tetanus (DTP) immunization: Month _____ Year _____ (**Required for attendance**)

*****If your child does not attend a Maryland school or is exempt from immunizations due to medical contraindications or religious objections, please have the child's physician fill out and sign the MD Department of Health and Mental Hygiene Form 896 (Maryland Immunization Certificate) or a signed doctors immunization schedule. If your child is too young to attend school, is home schooled or attends a school out of state, an immunization form must also be attached**

IMMUNIZATION INFORMATION AND/OR CERTIFICATION AND TETNUS INFORMATION IS REQUIRED PRIOR TO THE START OF CAMP, OR YOUR CHILD WILL NOT BE PERMITTED TO ATTEND.

AUTHORIZATION OF PARTICIPATION: To the best of my knowledge the above health history is correct and the individual herein described has permission to engage in all camp activities except as noted. I understand that falsification of any health-related information will result in the immediate dismissal of my child from camp.

AUTHORIZATION OF TREATMENT: I hereby give my permission to the medical personnel selected by the camp director to order treatment, x-rays, routine test and/or necessary transportation for my child. In the event an authorized individual can not be reached in an emergency, I hereby give permission to the physician selected by the camp director to secure, recommend or administer treatment, including hospitalization for my child, if necessary.

Parent/Guardian Name (print) _____ Parent/Guardian Signature _____ Date _____



Membership Tuition Policies

- Once registered and a membership agreement has been completed students are members until **written termination of membership**. No re-registrations! No Session Dates!
- **Membership is a minimum of 3 consecutive months. No Refunds for early termination.**
- First months tuition is due at time of registration.
- Monthly Membership class tuitions will be charged to a provided credit card by the 3rd of each month. Check or cash payments may be made in advance before the 1st of the next month to avoid charge to the provided credit card.
- A valid credit card is required to guarantee payment by the first of each month. Customers are responsible to provide updated credit card information as needed.
- The membership and monthly tuitions are ongoing all year around unless a written 30-day advanced Membership Break or Membership termination request has been received (see Temporary Membership Break and Membership Termination Policies).
- Monthly tuitions will not be reduced due to holidays or gym closings (last week in December and the week before Labor Day). Tuitions are based on a year-round schedule. Make up classes may be used for gym closings due to heat or inclement weather.
- A 10% sibling discount is offered to the youngest family member(s) class tuition as long as an older sibling is an active member.
- A 10 % discount is offered for any additional class per week enrolled. (Gym Play Add on excluded).
- Only students with membership agreement who attend classes and pay class tuitions are considered members and are eligible for **Member Benefits** including:
 - Free open gym
 - Make ups throughout the year
 - 50% discount on our new **Add on Gym Play** times
 - Special discount membership prices on Birthday Parties, Private lessons & Saturday Special Events ...
- Students on Temporary Membership Break are not considered current members and are not eligible for Member Benefits.

Class Program Policies

- **All new students** enrolling in any class **must attend an orientation class** prior to their scheduled registered class time.
- To ensure appropriate skill level placement all new & returning **female students ages 5 & up** enrolling in Girls Recreational Gymnastics classes **must attend an evaluation class** prior to their scheduled registered class time.
- Rebounders staff will recommend appropriate class level advancements throughout the year.
- A change of class type, day or time may be requested at any time during the year. If the requested class is not available, student will be placed on a member priority list.
- Classes with insufficient enrollment are subject to cancellation.
- Any classes including Boys only or Girls only classes may be combined at any time to avoid class cancellation.
- **Parents are not allowed inside the gym during their child's class** (Except for Parent-Child and Family Fitness classes). Parents, Family & Friends will be invited be inside the gym during scheduled observation days and special events.

Make up Policies

- Members may use Open Gym as make ups for any missed classes.
- Scheduled make up classes are available for members who missed classes due to sickness, vacation...
- Make up classes and open gyms are posted and do not require advanced sign up.
- **Parents are required to sign in** any student attending make up classes (with date of missed class) and open gym.

Drop Off & Pick up Policies

- **All students must be dropped off and picked up inside the building.**
- Students must wait inside and may not leave the gym without an adult.
- Parents must wait with their child inside the building until class starts.
- **Students must be picked up on time**, immediately following class. (Staff is not available to supervise children before or after class.)
- There will be a \$1.00 per minute charge for any late pick-ups.
- If parents wait in the lobby/observation area with siblings, please watch your child at all times and keep them safe.

Snow Policy

- Rebounders does **not** follow Baltimore County School closings.
- In case of inclement weather, please call the gym for cancellation announcements.

Temporary Membership Break Request

- Minimum Membership is 3 consecutive months. No Refunds for early termination.
- **A Temporary Membership Break Form must be completed and received at least 30 days prior to the requested Break.**
- Temporary Membership Break requests must be for at least 1 month and may not exceed 3 months.
- The requested Break Date must be the end of the month (30th or 31st) and the Return Date must be on the 1st or the 15th.
- While on Temporary Membership Break, monthly tuitions will not be charged and students will not be allowed to attend class .
- Members on Temporary Membership Break will be placed on a Student Priority List for the requested class.
- Students on Temporary Membership Break are not considered active members and are not eligible for any Member Benefits.
- At Return date, no re-registration is required, membership agreement and monthly tuition charges will resume.
- Temporary Membership Break Requests may be found on our website: www.rebounders.com

Membership Termination

- Minimum Membership is 3 consecutive months. No Refunds for early termination.
- **A Membership Termination Form must be completed and received at least 30 days prior to the requested Termination Date.**
- The requested Termination Date must be the end of the month, the 30th or 31st.
- After the requested Termination Date, monthly tuitions will not be charged. Students will no longer be eligible for any Member Benefits.
- Memberships may be renewed at any time, just let us know you are a returning member.
- Membership Termination Requests may be found on our website: www.rebounders.com