

Tri-Star Gymnastics Summer Camp Registration 2011

FAMILY INFORMATION

Parent Last Name: _____ First Name: _____ Cell: _____

Parent Last Name: _____ First Name: _____ Cell: _____

Home Phone: _____ Emergency Contact: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Parent Email: _____ Other Email: _____

CAMPER INFORMATION

Child Name: _____ Gender: ___ Birth date: __/__/__ Grade to be: _____

Child Name: _____ Gender: ___ Birth date: __/__/__ Grade to be: _____

Child Name: _____ Gender: ___ Birth date: __/__/__ Grade to be: _____

How did you hear about our facility? ___ Parent Magazine ___ Signs ___ Website ___ Birthday Party
 ___ Enrolled family (Please specify): _____ Other (Please specify): _____

Does your child have any medical conditions of which we should be aware?

Camp Costs:

Weekly Rate: \$140 per week, \$115 per week for any additional children

Daily Rate: \$40 per day, \$30 per day for any additional children.

Camp fees must be paid by the Wednesday before your enrollment week. If not paid by the previous Wednesday a *late fee of \$5.00 will be charged*. Students not pre-registered will be accepted as a **“Drop In”** if space is available and for an additional fee of \$8.00 for the week or \$5.00 per day.

Non-Members will pay a \$25.00 **Camp Registration Fee** per child. After this fee, tuition costs will be the same for Members and Non-Members.

Before Care is from 7:30-9:00 or any portion thereof is \$5 per day. **After Care** is from 3:30-5:30, and children may be picked up at anytime during after care. The cost is \$5 per day for after care. You may also choose to pay a weekly rate of \$40.00 for both. These fees are per child. **Late Pick Up** fee of \$1.00 per minute for students picked up after 5:30 PM.

An **Early Bird Discount** of \$25.00 off of one week of camp will be given to campers registered and paid in full by March 31, 2011.

Please fill out the registration form as follows:

Weekly Camper Example

Daily Camper Example

<p><input type="radio"/> Week 1 May 31-June3 <u>\$140</u></p> <p><input type="radio"/> Daily \$40/day x _____ days \$ _____</p> <p><input type="radio"/> Before Care \$5/day x _____ days \$ _____</p> <p><input type="radio"/> After Care \$5/day x 5 days <u>\$ 25.00</u></p> <p><input type="radio"/> Weekly Before/After \$40 \$ _____</p> <p>Total for Week 1 <u>\$165.00</u></p>	<p><input type="radio"/> Week 2 June 1-4 \$ _____</p> <p><input type="radio"/> Daily \$40/day x 2 days <u>\$80.00</u></p> <p>Circle Days: M T W H F</p> <p><input type="radio"/> Before Care \$5/day x 2 days <u>\$ 10.00</u></p> <p><input type="radio"/> After Care \$5/day x 1 days <u>\$ 5.00</u></p> <p><input type="radio"/> Weekly Before/After \$ _____</p> <p>Total for Week 5 <u>\$95.00</u></p>
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- Week 1 May 31-June 3** (\$112.00/4 day week)\$ _____
- Daily \$40/day x ___ days \$ _____
Circle Days: M T W H F
- Before Care \$5/day x ___ days \$ _____
- After Care \$5/day x ___ days \$ _____
- Weekly Before/After \$ _____
Drop in or Late fee \$ _____

Total for Week 1 \$ _____

- Week 5 June 27-July 1** \$ _____
- Daily \$40/day X ___ days \$ _____
Circle Days: M T W H F
- Before Care x _____ \$ _____
- After Care x _____ \$ _____
- Weekly Before/After \$ _____
Drop in or Late Fee \$ _____

Total for Week 5 \$ _____

- Week 2 June 6-10** \$ _____
- Daily \$40/day X ___ days \$ _____
Circle Days: M T W H F
- Before Care \$5/day x ___ days \$ _____
- After Care \$5/day x ___ days \$ _____
- Weekly Before/After \$ _____
Drop in or Late Fee \$ _____

Total for Week 2 \$ _____

- Week 6 July 5-8** (\$112.00/4 day week)\$ _____
- Daily \$40/day X ___ days \$ _____
Circle Days: T W H F
- Before Care x _____ \$ _____
- After Care x _____ \$ _____
- Weekly Before/After \$ _____
Drop in or Late Fee \$ _____

Total for Week 6 \$ _____

- Week 3 June 13-17** \$ _____
- Daily X _____ \$ _____
Circle Days: M T W H F
- Before Care x _____ \$ _____
- After Care x _____ \$ _____
- Weekly Before/After \$ _____
Drop in or Late Fee \$ _____

Total for Week 3 \$ _____

- Week 7 July 11-15** \$ _____
- Daily X _____ \$ _____
Circle Days: M T W H F
- Before Care x _____ \$ _____
- After Care x _____ \$ _____
- Weekly Before/After \$ _____
Drop in or Late Fee \$ _____

Total for Week 4 \$ _____

- Week 4 June 20-24** \$ _____
- Daily X _____ \$ _____
Circle Days: M T W H F
- Before Care x _____ \$ _____
- After Care x _____ \$ _____
- Weekly Before/After \$ _____
Drop in or Late Fee \$ _____

Total for Week 4 \$ _____

- Week 8 July 18-22** \$ _____
- Daily X _____ \$ _____
Circle Days: M T W H F
- Before Care x _____ \$ _____
- After Care x _____ \$ _____
- Weekly Before/After \$ _____
Drop in or Late Fee \$ _____

Total for Week 8 \$ _____

<input type="radio"/> Week 9 July 25-29 \$ _____ <input type="radio"/> Daily X _____ \$ _____ Circle Days: M T W H F <input type="radio"/> Before Care x ____ \$ _____ <input type="radio"/> After Care x ____ \$ _____ <input type="radio"/> Weekly Before/After \$ _____ Drop in or Late Fee \$ _____ Total for Week 9 \$ _____	<input type="radio"/> Week 10 August 1-5 \$ _____ <input type="radio"/> Daily X _____ \$ _____ Circle Days: M T W H F <input type="radio"/> Before Care x ____ \$ _____ <input type="radio"/> After Care x ____ \$ _____ <input type="radio"/> Weekly Before/After \$ _____ Drop in or Late Fee \$ _____ Total for Week 10 \$ _____
Total WEEKLY camp cost : \$ _____ ___ weeks x \$140 \$ _____ ___ weeks x \$112 \$ _____ Total Before Care cost: \$ _____ ___ days x \$5 Total After Care cost: \$ _____ ___ days x \$5 Total Weekly Before/After care \$ _____ <div style="text-align: center;">2011 Summer Camp WEEKLY Total</div> \$ _____	Total DAILY camp cost : \$ _____ ___ days x \$40 Total Before Care cost: \$ _____ ___ days x \$5 Total After Care cost: \$ _____ ___ days x \$5 <div style="text-align: center;">2011 Summer Camp DAILY Total</div> \$ _____

Summer Camp Policies and Procedures

Please read and initial or sign each of the statements listed below. If a statement is left blank, there may be a delay in your enrollment until all of the statements have been signed & therefore accepted.

- ___ Due to the high demand for camp places, each sale will be considered final.
- ___ Registrations are not transferable from one child to another.
- ___ Patrons who cancel a camp or wish to switch their child from one camp to another will receive a 50% refund of the cost of the dropped camp if notification is received **IN WRITING** at least 10 business days before camp starts.
- ___ In order to receive a 50% refund, patrons must contact the Tri-Star Gymnastics office **IN WRITING** (fax, mail or e-mail) no later than 10 business days prior to the first day of camp at: 2008B Johnson Industrial Blvd. Nolensville, TN 37135 or email at info@tristargym.net or FAX to 615-776-1833.
- ___ **There are no refunds for camps dropped less than 10 business days before camp begins.** Your tuition reserves a spot in camp for your child **REGARDLESS** of attendance. If we are not notified of any changes in the appropriate amount of time, you will be financially responsible for the time you committed to.
- ___ Payment is due at time of enrollment if enrolling for three weeks or more. Daily rate campers and those enrolling for less than three weeks are required to pay five business days in advance of when camp starts.
- ___ Campers must be picked up on time. After a 10 minute grace period they will be charged \$1 minute with a minimum charge of \$10 due when the child is picked up.
- ___ Camp is for children ages 5-13. They must be 5 by May 31st to attend.
- ___ Grouping is done at the discretion of the counselors and directors. Parents are asked not to request that certain campers be together in the same group. One of the important life skills we teach -- helping campers learn to make new friends -- is facilitated by the group counselor. We have found that campers adjust to the group much faster without a "buddy" to hang back with. Such requests can actually inhibit a shy or apprehensive child's adjustment to the other children in a new group. We appreciate parents' support in ensuring that campers come to camp ready and willing to be inclusive with everyone in their group.
- ___ Please, no cell phones, video games, iPods, etc. We are not responsible if any of these expensive items are lost or damaged, and request that these electronic devices stay at home. We have a camp phone if you need to contact your child and vice-versa. If brought they will be held in the office till the end of the day.
- ___ Please pack a sack lunch for your child each day. We have a water fountain available on the premises. Bottled water, and Gatorade are available for purchase, as well as a variety of snacks, also for purchase. Campers may purchase a concessions punch card for \$10.00.
- ___ We recommend you put sunscreen on your child in the morning before they come to camp.
- ___ Dress your child in clothes appropriate for play. No button, buckles or zippers and long hair should be pulled away from the face.
- ___ Label all belongings. Tri-Star Staff is not responsible for your child's personal belongings

Camp Rules

___ Respect other children, staff, equipment, facilities, and yourself

___ Keep hands feet and objects to yourself

___ Cooperate with staff and follow directions

___ Use appropriate language

___ Stay with your group at all times

Theme Weeks

Week 1 May 31-June 3

Summer Fun Week

Week 6 July 5-8

Red, White, & BBQ Wk

Week 2 June 6-9

X-Games Week

Week 7 July 11-15

Olympics Week

Week 3 June 13-17

The Great Outdoors

Week 8 July 18-22

Earth Week

Week 4 June 20-24

Space & Science Week

Week 9 July 25-29

American Idol Week

Week 5 June 27-July 1

Arts & Crafts Week

Week 10 Aug 1-5

Water Week

Tri-Star Gymnastics Waiver and Release Form

By nature, the pursuits of gymnastics, cheerleading and related activities carry the risk of physical injury. I recognize that severe trauma, including permanent paralysis or death can occur in sports or activities involving height and/or motion. These activities include (but are not limited to) gymnastics, tumbling, trampoline, dance, cheerleading and fitness. Mats, foam pits and safety equipment are provided for the student's protection, including the active participation of a coach or teacher however, this may be insufficient to prevent serious injury.

Being fully aware of these dangers, I hereby give consent for my child/ren to participate in any and all Music City Gymnastics, Inc., dba Tri-Star Gymnastics programs and activities and I ACCEPT ALL RISKS associated with this participation.

In any event of an accident or emergency, I hereby authorize my child to be transported to a hospital for medical treatment and I hold Music City Gymnastics Inc., dba Tri-Star Gymnastics, Carrel McCullar and their representatives harmless in the execution of such. Additionally, I hereby agree to individually provide for all medical expenses which may be incurred by myself or my child/ren as a result of any injury sustained while participating at or for Music City Gymnastics Inc., dba Tri-Star Gymnastics. I fully understand that Music City Gymnastics Inc., dba Tri-Star Gymnastics staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the Music City Gymnastics Inc., dba Tri-Star Gymnastics staff to render first aid to my child or children in the event of any injury or illness and if deemed necessary by the Music City Gymnastics Inc., dba Tri-Star Gymnastics staff to call our doctor and seek medical help or the calling of an ambulance for said child should Music City Gymnastics Inc., dba Tri-Star Gymnastics staff deem this to be necessary.

I also affirm that that I now have and will continue to provide proper hospitalization, health and accident insurance coverage which I consider adequate for both my child's protection and my own protection. I also understand it is the parents' responsibility to warn the child about the dangers of gymnastics and potential injury. The parent should warn the child according to what the parent feels is appropriate. Music City Gymnastics Inc., dba Tri-Star Gymnastics will only warn the child through safety messages, our teaching style and progressions.

In Consideration of my child/ren's participation I hereby (for myself and for my child/ren and our respective heirs and successors) COVENANT NOT TO SUE and FOREVER RELEASE Music City Gymnastics Inc., dba Tri-Star Gymnastics and Carrel McCullar (landlord), their 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 on the part of Music City Gymnastics Inc., dba Tri-Star Gymnastics, its owners, officers, agents or employees.

I have read and understand the risks and terms explained above and I accept the risks and terms with my signature.

Child/rens Names: _____

Parent Signature: _____ Date: _____