



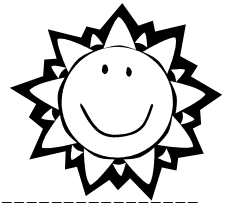
Summer Camp 2017
Weekly Sessions of Camp from June 26-August 11

Each session includes: Gymnastics instruction, Arts & Crafts, Games, Tumble Trak, Trampoline, Rock Wall and much more. End the week with a dance/gymnastics routine and a Certificate of Achievement!

Boys and Girls ages 3 and up are all welcome, any skill level. Half Day 9:00 a.m. to 12:00 p.m. or Full Day 9:00 a.m. to 3:00 p.m. sessions each week. Sibling discounts and Multi-session discounts available.

Any level competitive team and X-Cel team are also welcome to attend any session for an intensive and fun workout! Come learn new skills, practice your old ones, and get ready for next season!

Space is limited, so reserve early! Please call (845) 336-6706 or email excelgymnastics@gmail.com with any questions.



THE PLACE TO HAVE FUN AND LEARN!

EXCEL GYMNASTICS SUMMER CAMP REGISTRATION FORM 2016

Child name: _____ Age: _____ M / F Half Day / Full Day

Parent Name: _____ Phone: _____

Address: _____ Email: _____

- | | | |
|--|---|--|
| 1) June 26-June 30 <input type="checkbox"/> | 2) July 3-July 7 <input type="checkbox"/> | 3) July 10-July 14 <input type="checkbox"/> |
| 4) July 17-July 21 <input type="checkbox"/> | 5) July 24-July 28 <input type="checkbox"/> | 6) July 31-August 4 <input type="checkbox"/> |
| 7) August 7-August 11 <input type="checkbox"/> | | |

Fees & Discounts: Half Day 9:00 a.m. - 12:00 p.m. \$150 first child, first session/\$135.00 each additional
 Full Day 9:00 a.m. - 3:00 p.m. \$210 first child, first session /\$189.00 each additional

\$75.00 deposit due upon registration, balance due child's first day of camp.

Office Use: Pd _____ Date _____ Check # _____

PARENTAL PERMISSION FORM AND CONSENT TO TREATMENT:

In consideration of _____, my child/ward, being allowed to participate in any way in the programs at Excel Gymnastics, Inc., their related events and activities, the undersigned acknowledges and agrees that:

1. In the event of an injury or illness, I/we grant permission to any and all healthcare providers designated by to provide my/our child any and all necessary medical care related to the injury or illness. I/we further understand I/we will be contacted as soon as is practical as to the medical emergency and be provided with all necessary information related to the medical emergency.
2. I consent to the use by Excel Gymnastics, Inc. of any videotape, photograph, audiotape, or any other visual or audio reproduction in which I or my child may appear, including social media productions. I understand that these materials are being used for promotion of Excel Gymnastics, Inc. Such promotional activities include, but are not limited to marketing, recruitment, publicity, and general information articles. I release the Excel Gymnastics, Inc., its respective coaches, instructors, employees, volunteers, other participants, sponsors, and advertisers from any liability connected with the use of my or my child's picture, video or voice recording as part of any of the above or similar activities.
3. I, as parent and/or legal guardian of _____, understand the nature of the activities involved with gymnastics and his/her experience and capabilities and believe him/her to be qualified to participate in such activity. I fully understand that gymnastics involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my child's actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below. I further understand that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages incurred as a result of my child's participation in gymnastics.

I hereby release, discharge, covenant not to sue, and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS Excel Gymnastics, Inc. its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on the account of _____ caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations. I further agree that if, despite this release, I, the gymnast, or anyone on the gymnast's behalf, makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releases from any litigation expenses, attorney fees, loss liability, damage, or cost and Releasees may incur as the result of any such claim.

Printed name of Participant

Signature of Parent/Guardian

Date