Gymstars Summer Camps 2024

| Child 1 Name: | | | _ Age: | Date of Birth: _ | /_ | / |
|---------------|---|---|------------|------------------|----|-----|
| Child 2 Name: | | | _Age: | Date of Birth: _ | /_ | _/_ |
| Paren | t Name: | | | | | |
| Addre | ss: | | | | | |
| | Zip: | | | | | |
| | e #1: () | | | | | |
| | | | | | | |
| | If parent cannot be reache | | | | | |
| | • | | | | | |
| Name | : | | _ Relatior | nship: | | |
| Phone | e #1: () | Phone #2: () _ | | | | |
| | e send a healthy snack, cha \$120 week by week or save | | | • | k. | |
| 0 | WK 1: June 18,19,20 | "Music Makers" | | \$ | | |
| 0 | WK 2: June 25,26,27 | "Little Chefs" | | \$ | | |
| 0 | WK 3: July 2,3,4 | "Mickey & Minnie M | agic" | \$ | | |
| 0 | WK 4: July 9,10,11 | "Pet Shop Pals" | | \$ | | |
| 0 | WK 5: July 16,17,18 | "Going Green" | | \$ | | |
| 0 | WK 6: July 23,24,25 | "Shark Week" | | \$ | | |
| 0 | WK 7: July/Aug 30,31,1 | "Olympic Games" | | \$ | | |
| 0 | WK 8: Aug 6,7,8 | "Silly Science" | | \$ | | |
| 0 | WK 9: Aug 13,14,15 | "Tropical Paradise" | | \$ | | |
| 0 | WK 10 Aug 20,21,22 | "Dozer Days" | | \$ | | |
| | | | | Total: \$ | | |
| | ent is due at the time of signing Cash Check V | up and non-refundable: isa/Debit 2% transaction | fee | | | |

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| Has your child attended Gymstars Programs before? | | | | | |
|---|--|--|--|--|--|
| Our camps are very hands on an products. | d your child may come into contact with a variety of materials/food | | | | |
| Allergies: | | | | | |
| Medications: | | | | | |
| Anything Else We Should Know | About Your Child | | | | |
| Gymstar social media pages and | nts throughout each camp to share with parents. We post on our website for advertising purposes only. At any time, you can request to write NO here if you do not give your consent. | | | | |
| movements, basic tumbling skills injury may result in my child's parchild is in good physical condition him/her from participation in this or otherwise, my heirs or executor may have at any time against GY | gram of physical activity including but not limited to dance and exercise and basic locomotor skills. I understand the inherent risks including rticipation in this activity. I assume the risk and I hereby affirm that my and does not suffer from any disability that would prevent or limit exercise program. I hereby agree that I, for myself, my children, adopted ors, waive and release any and all rights and claims for damage that I MSTARS, LLC or their agents and representatives for any injury or hild's entry in activities sponsored by GYMSTARS, LLC. I hereby affirm and the above. | | | | |
| Parent Signature | Date | | | | |