

Twisters Summer Day Camp Registration

Prices:

Weekly rates: Full day 9am-4pm: \$195, 1/2-day 9am-12pm OR 1-4pm: \$125
Daily rates: Full day 9am-4pm: \$50/day, 1/2-day 9am-12pm OR 1-4pm: \$35/day;

"Twisters Gymnastics inspires youth to reach their full potential through gymnastics and fitness."

Participant Name (first) _____ (last) _____ Date of birth _____ Age _____ M _____ F _____

Mailing Address _____ City _____ Zip _____

Parent/Guardian Name (first) _____ (last) _____

Parent's Phone _____

E-mail Address _____

Emergency Contact Name (first) _____ (last) _____

Emergency Contact's Phone _____

Alternate Phone _____ Date(s) attending camp _____

Others who may pick your child up _____

People who may not pick your child up (Please let us know if there is a custody issue! Use back of sheet if necessary)

Does your child have any special needs, health issues, or food or medical allergies that we should be aware of?

I give my permission for Twisters Staff to apply sunscreen to my child. Signed: _____

***Children with skin allergies MUST provide their own sunscreen!**

- Proper clothing must be worn. Boys: fitted t-shirt or tank, shorts or sweat pants. Girls: leotard or shorts, sweats & t-shirt. No jeans. No skirts. No jewelry. Long hair must be pulled back away from face.
- Children are REQUIRED to have a water bottle.
- If your child is displaying physical symptoms of illness (i.e. cold or flu) s/he will not be permitted to stay for camp.
- Twisters Gymnastics has a ZERO TOLERANCE bullying policy. This is a safe place for all participants.

Twisters Gymnastics Registration Form and Hold Harmless Agreement and Photo Release

In consideration of Twisters Gymnastics, I/we, the undersigned, realizing no insurance coverage is provided for the participants and that without this Hold Harmless Agreement the organization would not be able to provide such recreational activities, will assume financial responsibility for any cost and/or damages relating to any accident or injury that might occur while participating in the named program.

I understand that there are certain risks and hazards involved in participating in the activities listed on this registration form that may result in injury or death to my child or other participants, including, but not limited to those hazards associated with playing conditions, equipment and other participants. I understand that I and/or my child may be photographed and I give consent for the use of photos to publicize Twisters Gymnastics.

I voluntarily elect to accept and assume all risks if injury incurred by my child (a) while practicing or playing as a member of the class/team so designated, (b) while serving in a non-playing capacity as a class/team member during practice or play by other teams or by other players on the team, and (c) while on or upon the premises of any and all of the areas arranged for by the team or league for practice or play, (d) while participating in any Twisters Gymnastics' activities. Furthermore, I/we will not hold Twisters Gymnastics employees/volunteers/board members or anyone otherwise involved in the named program responsible for any accident or injury that might occur. Having read and fully understood the above agreement, I/we do hereby agree to its terms:

Signed: _____ Date: _____

*Visit twistersgymnasticsandtumbling.com for more info. E-mail twistersgymnastics@hotmail.com or call 360-531-0748 with any questions. Twisters Gymnastics is a not-for-profit organization dedicated to offering recreational and competitive gymnastics opportunities to children in our area. The gym is located at 11526 Rhody Dr. in Port Hadlock, WA 98339.