



SUMMER GYMNASTICS CAMP

Vaughan Recreational Gymnastics Summer Camp 2022 Registration Form

- Gymnastics Camp
 Acro Camp
 Gym Only
 Ultimate Care
 (Free care until 5pm. Pick up after 5pm will automatically fall under Ultimate Care and will be charged)

Child's name: _____
 Address: _____
 City: _____ Postal Code: _____
 Telephone #: _____
 Age in July: _____ Date of Birth: _____
 Severe Allergies: _____
 Mom: _____ Tel: _____
 Dad: _____ Tel: _____
 Email: _____
 Other Contact Name & Tel: _____

NOTICE OF WARNING: There is a potential risk of injury involved in training and participating in any sport. Both Gymnastics Ontario and Vaughan Recreational Gymnastics have tried to create a safe and controlled environment for participation. Rules have been established for participation and conduct in and around the gymnastics areas MUST be followed. Please note that your child's image may be used on our website or in promotional materials. If you wish to opt out, you must do so in writing.

Signature: _____

Week	1: 4th - 8th July	2: 11th - 15th July	3: 18th - 22nd July
Time	AM PM Full	AM PM Full	AM PM Full
Week	4: 25th - 29th July	5: 2nd - 5th Aug*	6: 8th - 12th Aug
Time	AM PM Full	AM PM Full	AM PM Full
Week	7: 15th - 19th Aug	8: 22nd - 26th Aug	
Time	AM PM Full	AM PM Full	

*Pro-rated week

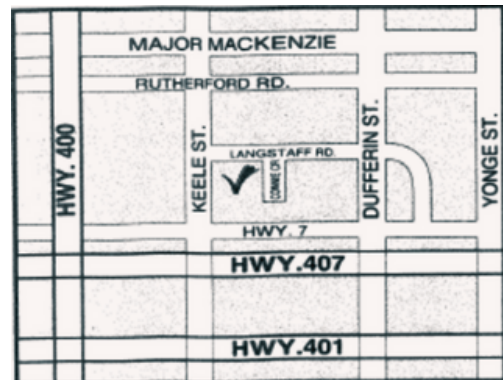
Vaughan Recreational Gymnastics Camp Sign Out Permission Form

I _____
 allow my child(ren) _____
 to be signed out and picked up each day of camp only by the names listed below:

- Name: _____
Relation to Child: _____
- Name: _____
Relation to Child: _____
- Name: _____
Relation to Child: _____
- Name: _____
Relation to Child: _____

***Please note that identification must be shown upon pickup.**

Parent Signature: _____



**Please return both completed sections
 to the office or to
 vaughangym@gmail.com**

Address:
 15 Connie Crescent, Unit 9
 Vaughan, Ontario
 L4K 1L3