

SUMMER JAMBOREE INFORMATION FORM

CARD / COMPUTER

Name _____ Date of Birth _____ Sex _____

Home Address _____ Home Phone # _____

_____ Cell Phone# _____

Parent or Guardian _____ Email _____

If registering to be with a friend, please list the child's name below. The director does her best to accommodate: _____

Person to call if parent cannot be reached:

Name _____ Phone # _____

Doctor's Name _____ Phone # _____

Any intolerance to drugs, medication, food or drink _____

Any previous or current illness, condition or injury the Tiny Tumblers Preschool Staff should be aware of and restrictions _____

Size of T-shirt _____ (CXS) 2-4 _____ (CS) 6-8 _____ (CM) 10-12 _____

MEMBERSHIP AGREEMENT

1. APPRECIATION OF RISK - I am fully aware of and appreciate that gymnastics activity involves motion, rotation and/or height and, therefore, creates the possibility of serious accidental injury. I agree to indemnify and hold harmless North Shore Gymnastics, Inc., its owners, officers, agents or employees for any and all claims arising as a result of engaging in or participating in all activities of North Shore Gymnastics, Inc. incidental thereto, whenever, wherever or however the same may occur. This includes but is not limited to all instructional gymnastics classes including those with parent participation, preschool classes, birthday party activities, open gym, summer jamboree and charitable fund raisers.

An inherent risk of exposure to infectious diseases including COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. By allowing your child to participate in activities at North Shore Gymnastics and entering our facility, you voluntarily assume all risks related to exposure to COVID-19.

2. MEDICAL ATTENTION - I hereby release the Tiny Tumblers Preschool Staff to render temporary first aid treatment to my child, _____, in the event of an injury during the course of participation in the program.

3. SESSIONS ATTENDING - Please check all sessions attending

Session 1 _____ June 3– June 7

Session 4 _____ June 24– June 28

Session 2 _____ June 10 – June 14

Session 5 _____ July 8 – July 12

Session 3 _____ June 17- June 21

Session 6 _____ July 15 - July 19

4. PAYMENT - ALL payments due May 18th! I understand that this amount is nonrefundable unless canceled on or before 2 weeks prior to your child's session in which case all except \$75 per session will be refunded. After this time, the total fee is nonrefundable. There will be no camp day makeups. However, if your child misses due to illness, the child will be allowed to make up in two gymnastics classes for each day missed by scheduling a make up with the pro shop staff. Make ups must be done during the 2024 Summer session.

5. MEDIA RELEASE- NSG has permission to take photographs of my child, _____, and post them to our FB page titled Tiny Tumblers Preschool and our website, northshoregymnastics.net.

6. LIBRARY- My child, _____, has permission to walk to the library with the NSG staff.

As parent and/or legal guardian of, I do hereby verify that I fully understand and accept each of the above conditions for permitting my child to participate in camp activities.

PARENT or GUARDIAN _____ DATE _____