

Gold Country Gymnastics Camp Registration Form



- June 19-23
- June 26-30
- July 10-14
- July 17-21
- July 31-August 4

Camper Name: _____

M or F (circle one)

Birthdate: _____ T-shirt Size: _____

Food Allergies: _____

Individual Needs: _____

Parent Name: _____

Address: _____

Phone: _____ Alt. Phone: _____

e-mail: _____

Emergency Contact and Phone

Name: _____ Phone: _____

Physician: _____ Phone: _____

Insurance Provider: _____

Deposit Paid \$ _____ How Paid: _____

I am aware that gymnastics involves potentially hazardous situations and I am voluntarily permitting my child to participate in the activities with the knowledge of the danger involved. I hereby agree to accept any and all risks of injury to him or her that may result therefrom. In addition, I hereby acknowledge and agree to release, defend, indemnify, and hold harmless Gold Country Gymnastics (GCG), its employees, principals, and agents and assume full responsibility for any loss or damage for any claim, lawsuit, or demand for loss or damage on account of injury or death whether caused by the sole, active, or passive negligence of GCG, its employees, or agents while he or she is participating in any way in any instruction or activity.

Parent Signature

Date: _____

Field Trip Release

The above listed camper has my permission to attend all field trips associated with the summer camps checked above including Fridays at the park and swimming pool. I am aware that they may be driven to and from these field trips by adult coaches of the gym. Each child will be assigned to a coach while on the field trip who will be fully responsible to insure their safety. Children will be expected to know who their assigned coach is and to stay in direct contact with them at all times during the field trip. Children will not be allowed, for any reason, to leave the field trip or vary from the assigned plan. Should there be a medical emergency associated with the camper, coaches, if unable to reach parent, will determine what type of medical intervention is necessary for the health and safety of the child.

Parent Signature

Date: _____