

Excel Gymnastics in St. Charles

March 29th - April 2nd

**Come Join Us For An
'Excel'lent Spring Break!**

Along with all of our regularly scheduled classes, we will offer several 'Excel'lent Special Events!

FLIP FLOP CLINICS CARTWHEEL & ROUND-OFF CLINICS (ages 5 & older or Team/Pre-Team)

Monday	3/29	2:00 - 3:00 pm
Wednesday	3/31	2:00 - 3:00 pm
Thursday	4/1	2:00 - 3:00 pm

Clinics are \$15 for the first clinic and ONLY \$10 for each additional clinic when you register in advance!

JR. Open Gym (ages 1 1/2 - 6 years)

Monday	3/29	11:00 - 12:00
Tuesday	3/30	11:00 - 12:00
**Wednesday	3/31	1:00 - 2:00
**Thursday	4/1	11:00 - 12:00
**Friday	4/2	10:00 - 11:00

JR. Open Gyms are only \$5 per child if you sign up in advance, and \$7 if you sign up the day of, regardless of whether your child is taking classes.

OPEN GYM (ages 6 - 17 years)

Monday	3/29	3:00 - 4:00 pm
Tuesday	3/30	3:00 - 4:00 pm
Wednesday	3/31	12:00 - 1:00 pm
Thursday	4/1	12:00 - 1:00 pm
**Friday	4/2	7:30 - 9:00 pm

Open Gyms are only \$5 per child if you sign up in advance, and \$7 if you sign up the day of, regardless of whether your child is taking classes.

****These are our normally scheduled Jr. Open Gym/Open times. Normal prices will apply!
Spaces for our Special Events are limited, so register EARLY to make sure you get the day and time you want!**

(Payment in full is due at the time of registration)

2010 Special Events Registration Form: St. Charles

Today's Date: _____

Please Check:

Jr. Open Gym: 1.5 to 6yrs old

- ____ Mon. 3/29 11:00 - 12:00
- ____ Tues. 3/30 11:00 - 12:00
- ____ Wed. 3/31 1:00 - 2:00
- ____ Thur. 4/1 11:00 - 12:00
- ____ Fri. 4/2 10:00 - 11:00

Please Check:

Cartwheel & Round-off

- ____ Mon. 3/29 2:00 - 3:00 pm
- ____ Wed. 3/31 2:00 - 3:00 pm
- ____ Thur. 4/1 2:00 - 3:00 pm

Open Gym 6 to 17 yrs old

- ____ Mon. 3/29 3:00 - 4:00
- ____ Tues. 3/30 3:00 - 4:00
- ____ Wed. 3/31 12:00 - 1:00
- ____ Thur. 4/1 12:00 - 1:00
- ____ Fri. 4/2 7:30 - 9:00

Please Check:

Flip-Flop

- ____ Mon. 3/29 2:00 - 3:00 pm
- ____ Wed. 3/31 2:00 - 3:00 pm
- ____ Thur. 4/1 2:00 - 3:00 pm

Child's Name: _____ Birth Date: _____ Age: _____

Address: _____ City: _____ Zip: _____

Father's Name: _____ Mother's Name: _____

Home Phone: _____ E-Mail: _____

Emergency Contact (Name & Phone): _____

PARTICIPATION RELEASE, WAIVER, AND ASSUMPTION OF RISK

Excel Gymnastics Academy, Inc.; 3N800 Peck Rd; St. Charles, IL 60175; Phone: (630) 513-0132

I, _____, do hereby give my consent for my child, _____, to participate in gymnastics activities at Excel Gymnastics Academy, Inc. I am aware of and do acknowledge the risks inherent in gymnastics activity and I know that these activities can cause my child to be injured.

Acknowledging the above I nevertheless, on behalf of the above named child, myself, my spouse, and our heirs, administrators and executors, do hereby release, indemnify, and agree to hold harmless Excel Gymnastics Academy, Inc., and all persons or entities associated with Excel Gymnastics Academy, Inc. from any responsibility or liability for any and all claims, demands, damages, costs, causes of action and expenses (including, without limitation, reasonable attorneys' fees) arising out of or resulting from my child's participation in or involvement with gymnastics activity, including, without limitation, any personal injury, disability, or property damages incurred or sustained by me or my child during or as a result of our attendance at said gymnastics activities.

Parent's Signature: _____ Date: _____

Office Use Only:-----

Amount Due: _____ Amount Paid: _____ Cash/Check#: _____ Date: _____