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Welcome to International Gold Gymnastics!

Here at IGG, we strive to provide a gymnastics camp for both boys and girls to learn to love to be active regardless of age, ability, or skill level.

Attached you will find the following forms: Policies, Registration, Authorized Pick-Up, and Club Wavier & Release. Please read, sign, and return them to the front office when completed.

We look forward to the opportunity to get to know all our families and to continue to provide quality instruction in a child-focused, family-friendly environment. Please feel free to ask any questions you may have.

Best Regards,

International Gold Gymnastics

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# After School Camp: Registration

Participant 1's Full Name: Date of Birth: Participant 2's Full Name: Date of Birth:

Are there copies of custody/restraining orders on file for this child(ren): Yes □

No □

Who, besides parent/guardian, is authorized to make changes to this form: Parents/Guardians/Responsible Party

Guardian 1: Relationship: Address: City: State: Zip Code: Email: Main Phone: Secondary Phone:

Guardian 2: Relationship: Address: City: State: Zip Code: Email: Main Phone: Secondary Phone:

School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Information (when parents cannot be reached):

Name: Relationship: Address: City: State: Zip Code: Email:

Main Phone: Secondary Phone:

Name: Relationship: Address: City: State: Zip Code: Email: Main Phone: Secondary Phone:

Participant's Physician: Phone: Address: City: State: Zip Code:

Hospital Preference: Medical Conditions: Allergies: Medication:

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# After School Camp: Code of Conduct

The following is International Gold Gymnastics’ After School Gymnastics Code of Conduct. In order for your child to attend our after school camp, you and your child must read and sign the code of conduct and return it with your registration.

### Rules:

1. Keep hands, feet, and all objects to yourself at all times.
2. Always use appropriate behavior & language.
3. Follow the rules & listen to/be respectful to all IGG Staff and other students at all times.
4. ALL electronics and or valuable items should be left at home. International Gold Gymnastics will not be held responsible for any items lost, stolen, or broken.
5. HAVE FUN!

We do write accident reports for injuries. They do require a parent/guardian signature. The original copy is for IGG to keep on file. A copy can be made for the parent/guardian at any time upon request.

We do have Behavior Reports for misbehavior. Misbehavior results in the following:

1. The child given a verbal warning and may get time out.
2. The child is given another verbal warning from coach/director and may get a time out in the office.
3. The child is given a verbal and a written warning. The parent may be called and will have to sign the written warning at time of pick up. The original copy is for IGG- a copy can be made upon request.
4. The child will be suspended for 1 to 5 days from the program.
5. The child will be expelled from the program.

Thank You for choosing International Gold Gymnastics After School Gymnastics! We look forward to a great year with your child/children and your family.

*I I* Date:

Student Signature Print Name Parent Signature Print Name

*I I* Date:

Student Signature Print Name Parent Signature Print Name

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# After School Camp: Authorized Pick Up

The following people are allowed to pick up this child(ren):

Name: Phone#: Name: Phone#: Name: Phone#: Name: Phone#: Name: Phone#: Name: Phone#:

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# After School Camp: Policies

I, give my permission for my child/children,

to be picked up from their school by International Gold Gymnastics. I understand that my child/children will be escorted to IGG with supervision of IGG Staff. By signing this document, I acknowledge the inherent risk of bodily injury, or even death involved with the operation of motor vehicles and being a passenger within a motor vehicle. By signing this document, as Parent and/or Natural Guardian of my child/children, I hereby release, hold harmless and exculpate International Gold Gymnastics, it's Officers, Agents, Employees, assigns, and representatives, from any and all liability with respect to transportation of my child/children.

### The van can only wait for a child/children for up to five minutes after the bell. This is to ensure that the van/bus can get to the next school on time.

Parent Signature: Date:

**Absent**

If a child/children are going to be absent from the After School Camp, I am responsible for calling to inform International Gold Gymnastics by NOON the day of absents OR if alternate transportation has been made for that day. If I have 3 unreported absences or more, I will be charged $25 per unreported absence. Payment is due upon return to the camp. International Gold Gymnastics reserves the right to release the child/children from the program for excessive unreported absences.

Parent Signature: Date:

**Pick Up**

I acknowledge that pick up time from the After School Camp is 6:00pm. If lateness is unavoidable, I will call and notify International Gold Gymnastics via phone of my late arrival. Staff will make reasonable accommodations up to 3 times. After the 3rd incident I will be charged $1.00 per minute. Payment must be made at time of pick-up. My child will be taken from the after-school room to the front desk to wait for my arrival. International Gold Gymnastics reserves the right not to pick up the child/children from their school until payment is made in full.

Parent Signature: Date:

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# After School Camp: Weekly Pricing

**ANNUAL REGISTRATION FEES:**

$50/one child

$75.00/2+ children

**WEEKLY FEES:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Prorated to Rec Classes (4:00PM – 5:40 PM Only)** | | | |  | **Full Regular Price** | | |
|  | **1 Class** | **2 Classes** | **3 Classes** |  |  | **1st Child** | **2nd+ Child** |
| **1 Day** | 25 | 22 | 19 |  | **1 Day** | 28 | 25.2 |
| **2 Days** | 32 | 29 | 26 |  | **2 Days** | 35 | 31.5 |
| **3 Days** | 39 | 36 | 33 |  | **3 Days** | 42 | 37.8 |
| **4 Days** | 46 | 43 | 40 |  | **4 Days** | 49 | 44.1 |
| **5 Days** | 52 | 49 | 46 |  | **5 Days** | 55 | 49.5 |

Due to limited space, if you would like for your child to be picked up via van, the days we are to pick your child up must be consistent *every week* in order to hold your child’s spot*.* For example, you cannot choose to ride the van M-W once week, and then Th-F the next. Please select the days below that you intend for your child to ride the van for every week of the entire school year.

Monday **\_\_\_\_\_\_\_\_**

Tuesday **\_\_\_\_\_\_\_\_**

Wednesday **\_\_\_\_\_\_\_\_**

Thursday **\_\_\_\_\_\_\_\_**

Friday **\_\_\_\_\_\_\_**

**Payment**

Payment is Due on Friday for each week; if payment is not made to International Gold Gymnastics by Friday close of business at 8:00pm, International Gold Gymnastics reserves the right not to pick up your child/children for the following week(s) until payment is made in full.

A $25.00 bank fee will be applied to your account for any returned check.

Parent Signature: Date