



## Winter Break Registration Form

### Participate Information

<b>First Name :</b>	<b>Last Name:</b>
<b>Age:</b>	<b>Birthdate dd/mm/year:</b>
<b>Home Address:</b>	
<b>City:</b>	<b>Postal Code:</b>
<b>Phone (Mom):</b>	<b>Phone (Dad):</b>
<b>Emergency Contact Name:</b>	<b>Phone:</b>
<b>Health Conditions?    Yes / No</b> If YES, please explain:	

#### PARTICIPANT RELEASE AND WAIVER

I have been advised and I understand that: (a) there is a risk of injury associated with participation in the instructional programs/activities at Woodbridge Gymnastics; (b) There will be no make-up classes for any reason (ie. illness, vacations, school/ family functions etc.) ; (c) NO REFUNDS will be given out after the SECOND class (Unless medical certificate is provided); and (d) Woodbridge Academy of Gymnastics reserves the right to cancel classes due to extreme weather conditions without a make-up class. I HAVE READ AND UNDERSTOOD THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT I AGREE TO THE POLICIES AT WOODBRIDGE GYMNASTICS

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\* Please note there will be a \$25.00 charge for all NSF Cheques

**Early Drop-off 8:30 - 9:00am**  
*\*Gym activities begin at 9:00 am*  
**Half Day Pick by 12:00pm**  
**Full Day Pick up between 4:30 – 5:00pm**

**Camp Prices:**

**Half Day - \$40.00**  
**Full Day - \$60.00**  
**Half Day Week (4 days)- \$150**  
**Full Day Week (4 days)-\$230**

Office Use Only

	M	T	W	TH	F	Cost	Payment
<b>Week 1:</b> December 20 <sup>th</sup> -23 <sup>rd</sup>					<b>X</b>		
<b>Week 2:</b> December 27 <sup>th</sup> - 30 <sup>th</sup>					<b>X</b>		