



2022

**Full Day Summer Camp
Registration Form**

Child's Name: _____ Age: ____ DOB: _____ M/F

Medical/Allergy Information: _____

2nd Child's Name: _____ Age: ____ DOB: _____ M/F

Medical/Allergy Information: _____

****Ages 5-12****

NBG does not provide lunch

There is a \$25 nonrefundable/non transferrable deposit due for each week of registration. The deposit will go towards the total amount due each week.

Dates/ Theme	Full Day
June 10	F
Summer Break Camp	
June 13-17	M Tu W Th F
Minions	
June 20-24	M Tu W Th F
Island Adventure (water week)	
June 27-30	M Tu W Th
Ice Age	
July 6-8	W Th F
Farming Fun	
July 11-15	M Tu W Th F
Star Command	

Dates/ Theme	Full Day
July 18-22	M Tu W Th F
Fun in the Sun(water week)	
July 25-29	M Tu W Th F
Potter Magic	
Aug 1-5	M Tu W Th F
Everything's a game	
Aug 8-12	M Tu W Th F
Lions, Tiger, and Bears	
Aug 15-19	M Tu W Th F
Fire and Ice (water week)	
Aug 22-26	M Tu W Th F
Watch us grow	

**** This week is a water week. Expect outside play in water all week. Children will need water clothing and shoes, towel, and extra clothing for inside play.**

Camp Costs

1 Day 7:45-5:15	\$47
2 Days 7:45-5:15	\$85
3 Days 7:45-5:15	\$117
4 Days 7:45-5:15	\$145
5 Days 7:45-5:15	\$167

Parent/Guardian Name: _____

Address: _____ City: _____ Zip: _____

Contact Phone: _____ (C/HM/WK) Alt Phone: _____ (C/HM/WK)

Email address: _____

Emergency Contact Name: _____ Phone: _____

To reserve your spot for NBG Summer Camp, fill out the registration form and return it to New Bern Gymnastics as soon as possible. **Camps must be paid in full at time of reservation, or a credit card may be put on file to be charged at 9am the Friday prior to camp day. Cancellations must be communicated prior to 9am the Friday before camp week.** Keep in mind we will fill on a first come, first serve basis. Thank you for your interest in New Bern Gymnastics! ***There is a \$25 nonrefundable/non transferrable deposit due for each week of registration. The deposit will go towards the total amount due for each week.***

Please Initial:

_____ Initial **Waiver & Release:** I am fully aware and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death as well as other damages and losses associated with participation in a gymnastic event. I further agree that New Bern Gymnastics and their agents, officers, employee, instructors, directors, and landlords shall not be liable for any losses or damages occurring as a result of participation in the event, except where such loss or damage is the result of the intentional or reckless conduct of one of the organizations or individuals identified above.

_____ Initial **Medical Release:** I hereby give consent to New Bern Gymnastics to provide medical care, and to give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety. In case of injury or sudden illness, I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for my child(s)'s health and safety. It is understood that I will accept the expense of this service.

_____ Initial **Media Release:** I hereby give consent for New Bern Gymnastics to take a picture for **internal safety/security** use ONLY. This photo will NEVER be shared publicly. I hereby give consent to New Bern Gymnastics to use my child's image in ANY form of **PUBLIC** media, including print, television, and internet, for advertisement and promotional purposes. Names will never be associated with a picture unless express consent by parent or guardian for specific image.

_____ Initial **Late Pick-up** Pick up time is at 5:15pm. Any child picked up after 5:20 for any reason will incur a \$1 per minute per child fee

_____ Initial **Auto Billing** Please charge my payment information on file the Friday prior to the Camp day(s) for the balance due.

_____ Initial **Deposit** I understand there is a \$25 nonrefundable/ non transferrable deposit due for each week of camp my child is registered

_____ Initial **Cancellations:** I understand that all cancellations must be communicated prior to 9am the Friday before camp week.

_____ Initial **Covid-19** New Bern Gymnastics, Inc. is committed to assisting families by providing its programs during the national response to COVID – 19. New Bern Gymnastics, Inc. will remain open and provide programs so long as its services are allowed by Federal, State and Municipal laws and regulations. New Bern Gymnastics, Inc. has modified its procedures and programs to limit participant exposure to other participants and family members, including modifying participant drop-off and pick-up procedures, separating program participants into smaller groups, and increasing sanitary procedures, among other modifications. Despite the efforts of New Bern Gymnastics, Inc. to minimize participants' exposure to other participants, the undersigned acknowledges that New Bern Gymnastics, Inc. cannot ensure that its participants will not be exposed to COVID – 19 or any other communicable disease. The undersigned further acknowledges that the undersigned holds New Bern Gymnastics, Inc. harmless from any and all liabilities, of any kind or nature, arising out of the participation in New Bern Gymnastics, Inc. programs by the undersigned's children, grandchildren or ward(s) and related to COVID – 19 or any other communicable disease.

_____ Parent Signature

_____ Date