



# 2019 Preschool Program SUMMER SCHEDULE

Registration starts March 1, 2019

(860) 646-3687      contact@winingersgymnastics.com

### OPTION 1: Weekly AM Classes

We offer 10 weeks of summer classes ages 1 ½ and up.

**Please check the appropriate class and circle the week(s) you would like your child to attend.**

#### CLASSES:

Time	Age	Days	Price	✓
9:15-10:00am	1 ½-3 years	Monday and Wednesday	2 classes-\$30/week	
10:05-10:50am	3 & 4 years	Monday <b>thru</b> Thursday	4 classes-\$60/week	
11:00-11:45am	4 & 5 years	Monday <b>thru</b> Thursday	4 classes-\$60/week	

**WEEKS:** All weeks are **Monday thru Thursday** except week #3 which is Mon, Tues, Wed, and Fri. **Please circle week(s).**

#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
6/17-20	6/24-27	7/1-3, 5	7/8-11	7/15-18	7/22-25	7/29-8/1	8/5-8	8/12-15	8/19-22

### OPTION 2: 5-Week PM Sessions

We offer two 5-week sessions in several time/day options (ages 1 ½ and up).

**Please check the appropriate class/day and circle session(s) you would like your child to attend.**

Time	Age	Mondays	Thursdays
3:45-4:30pm	1 ½ -3 years		
4:35-5:20pm	3 years		
5:25-6:10pm	3 & 4 years		
6:15-7:00pm	4 & 5 years		

**\$75 each SESSION: Please circle session(s)**

**Session #1**  
Weeks of 6/17-7/18

**Session #2**  
Weeks of 7/22-8/22

**Payment in full, CASH or CHECK ONLY (no debit or credit cards). No refunds or credits for missed classes, however a missed class may be made up during the summer.**

## 2019 SUMMER ENROLLMENT FORM

Student Name \_\_\_\_\_ M/F \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Mother's Cell \_\_\_\_\_  
 Father's Name \_\_\_\_\_ Father's Cell \_\_\_\_\_

I understand and agree that: (a) tuition payments are nonrefundable, (b) payment in full is due at the time of registration, (c) a \$25.00 fee will be assessed against all returned checks. I, the undersigned on behalf of myself and minor child participating in classes, lessons and/or programs of Wininger's Gymnastics (collectively "Programs") acknowledge and appreciate the risks of injury associated with participation in the Programs. We knowingly and willingly assume all such risks.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_