

2019 Gymnastics Program SUMMER SCHEDULE

Registration starts March 1, 2019

(860) 646-3687

contact@wingersgymnastics.com

OPTION 1: Weekly Classes

We offer 10 weeks of summer classes ages 5 and up.

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

CLASSES:

Time	Program	Min. Age	Days	Price	✓
9:00-12:00pm	Gymnastics - ½ Day Camp	6 years	Monday <u>thru</u> Thursday	4 days x3 hr. -\$129/week	
9:00-10:00am	Gymnastics	5 years	Monday <u>thru</u> Thursday	4 classes-\$66/week	
10:00-11:00am	Gymnastics	5 years	Monday <u>thru</u> Thursday	4 classes-\$66/week	
11:00-12:00pm	Trampoline & Tumbling	6 years	Monday <u>thru</u> Thursday	4 classes-\$66/week	
4:00-5:00pm	Tumbling	6 years	Tuesday and Thursday	2 classes-\$33/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 5 and up).

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

Time	Program	Mondays	Tuesdays	Wednesdays
4:00-5:00pm	Gymnastics (1 class per week)		N/A	
5:00-6:00pm	Gymnastics (1 class per week)			

\$82 (5 classes) 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 Winger'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 _____