

2022
FLIP-FLOP SUMMER FUN WEEKS
REGISTRATION

860-526-4132 ~ www.flipflogym.com

CHILD'S NAME _____ AGE _____ BIRTHDAY _____
 ALLERGY _____
 PARENT'S NAME _____
 ADDRESS _____ CITY _____ ZIP _____
 HOME PHONE _____ CELL PHONE _____
 EMERGENCY CONTACT _____ PHONE _____
 EMAIL _____

SUMMER THEME WEEKS! <small>(Pack snacks NO nuts or peanut butter)</small>	9-12:00 \$225	AMOUNT DUE
WK #1 JUNE 27-JULY 1 Age 3+ SUMMER FUN & GAMES!	MONDAY - FRIDAY	\$225.00
WK #2 JULY 4-10 GYM CLOSED INDEPENDENCE DAY	GYM CLOSED	GYM CLOSED
WK #3 JULY 11-15 TEAM (Competitive gymnasts only)	TEAM WEEK	TEAM WEEK
WK #4 JULY 18-22 Age 3+ 9-12 PRINCESS WEEK	MONDAY- FRIDAY	\$ 225.00
WK #5 JULY 25-29 Age 3+ 9-12 CIRCUS WEEK	MONDAY - FRIDAY	\$225.00
WK #6 AUG. 1-5 Age 3+ 9-12 FLIP, TUMBLE & TRAMPOLINE	MONDAY - FRIDAY	\$225.00
WK #7 AUG. 8-12 Age 4+ 9-12 NERF & NINJA WEEK! Pack your nerf gear! Please label with child's name	MONDAY - FRIDAY	\$225.00
WK #8 AUGUST 15-19 TEAM CAMP (Competitive gymnasts only)	TEAM WEEK	TEAM WEEK

SUMMER REGISTRATION FEE FOR NON-MEMBERS (Per family) \$25

MUST BE PAID IN FULL TO REGISTER. TOTAL DUE \$ _____

All camp participants must be potty trained

Please bring a backpack filled with:

Snack **NO PEANUT BUTTER OR NUTS**
 Water bottle
 Towel
 Bathing suit
 Wear sun screen
 Flip-Flops / Shoes that can get wet

ALL WAIVERS AND REGISTRATION FORM MUST BE SIGNED & FILLED OUT COMPLETELY IN ORDER TO PARTICIPATE IN CLASS! AS OF 4/1/22 MASKS ARE OPTIONAL

FLIP-FLOP GYMNASTICS SUMMER PROGRAMS
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND
INDEMNITY AGREEMENT (“AGREEMENT”)

In consideration of participating in the programs at Flip-Flop Gymnastics, I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the “releasees” named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue Flip-Flop Gymnastics, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the “RELEASEES” herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the “releasees” or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Printed name of participant

Date: _____

Signature of participant

PARENTAL CONSENT

AND I, the minor’s parent and/or legal guardian, understand the nature of the above referenced activities and the Minor’s experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby Release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses or damages on the minor’s account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor’s behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Printed name of Parent/or Legal Guardian

Date: _____

Signature of Parent/or Legal Guardian

CONSENT TO PHOTOGRAPH

I HEREBY GRANT FLIP-FLOP GYMNASTICS PERMISSION TO USE MY PHOTO IMAGE OR MY CHILD’S PHOTO IMAGE FOR PUBLIC RELATIONS AND ADVERTISING PURPOSES. THESE PHOTO IMAGES MAY BE USED ON BROCHURES, POSTERS, AND IN THE NEWSPAPER TO SHOW THE POSITIVE IMPACT THAT FLIP-FLOP GYMNASTICS HAS IN OUR COMMUNITIES. I HEREBY WAIVE ANY RIGHT THAT I MAY HAVE TO INSPECT OR APPROVE THE FINISHED PRODUCT OR PRODUCTS OR THE ADVERTISING COPY OR PRINTED MATTER THAT MAY BE USED IN CONNECTION WITH THE PHOTOGRAPHS. I GRANT THIS PERMISSION VOLUNTARILY.

PRINTED NAME OF ADULT _____

NAME OF CHILD _____
IF PHOTO IS OF CHILD, PARENT / GUARDIAN SIGNATURE _____

DATE _____