



Exxcel Gymnastics & Climbing 2018 April Vacation Camp Participant

Camper's Last Name:	Camper's First Na	ame: Middle:	Age:	Sex:	DOB:	
Street Address:	Н	ome Phone #:	em	ail: You will i	receive confirmat	ion via email
P.O. box:	Home Phone #:		State:		ZIP Code:	
Parent(s) Name:		Parent(s) Name:				
Cell Phone #:		Cell Phone #:				
Work Phone #:		Work Phone #:				
Chose camp because/Referred by (please check or	ne box):					
☐ Family/Friend ☐ Ad ☐ Close to hor	ne/work Website	Other				
Are there any medical conditions to which we shou	uld be alerted?					

Acknowledgment of Risk and Waiver of Liability

As the parents or legal guardians, of

we hereby give permission for our child to participate in programs at Exxcel Gymnastics, LLC. We recognize that gymnastics and climbing are sports that involve height and rotation of the body, and there are inherent risks involved. On behalf of our child and on our own behalf, we agree to waive all claims against Exxcel Gymnastics, LLC and it's owners, staff and instructors for any liability, loss, cost, damage, medical expense, long-term care or emotional distress arising out of any personal injury, including total disability, paralysis and death, which may occur to any of our children while on the premises of or under the instruction, supervision, or control of Exxcel Gymnastics, LLC. We hereby testify to our child's sound health of mind and body and we authorize Exxcel Gymnastics, LLC to seek medical treatment at the nearest medical facility in case of emergency.

- There are no refunds or credits for cancellation unless notification is given three days prior to the first day of camp.
- Exxcel reserves the right to make, display and/or publish individual photographs. Photographs may be displayed within the gym, on the Internet, or printed in our advertisements or promotional materials.
- Exxcel is not responsible for lost or stolen items brought into the facility. Please leave all valuable items at home.
- There is a \$15.00 late fee charged if a child is picked up 15 minutes after the scheduled pick up time from camp

We have read and understand all the above and agree to the above terms including the Waiver of Liability. Parent/Stepparent/Guardian

(sign here) Date

Please circle off the days that your campers will be attending below:

Dates:	Please Circle Camp Choices *		Extended Day				
Monday	4/16/18	Half Day	Full Day	GYM/SPORTS	8am - 9am	3pm - 4pm	4pm - 5pm
Tuesday	4/17/18	Half Day	Full Day	GYM/SPORTS	8am - 9am	3pm - 4pm	4pm - 5pm
Wednesday	4/18/18	Half Day	Full Day	GYM/SPORTS	8am - 9am	3pm - 4pm	4pm - 5pm
Thursday	4/19/18	Half Day	Full Day	GYM/SPORTS	8am - 9am	3pm - 4pm	4pm - 5pm
Friday	4/20/18	Half Day	Full Day	GYM/SPORTS	8am - 9am	3pm - 4pm	4pm - 5pm

Must be 5 years old for SPORTS CAMP