

THE GYM

1. Select a payment plan:
2. 8 weeks _____ 16 Weeks _____ 32 Weeks _____
3. Refer to the Tuition Schedule for the amount of tuition for each of the classes chosen and enter them in the chart below. Remember to deduct 10% for each additional child.
4. Enter the Annual Membership fee of \$50 per child. This fee covers registration, insurance, and membership.
5. All forms must be signed.
6. Make your check payable to The Gym, Inc. and mail it to P.O, Box 202, Hillburn, NY 10931-0202.

Please tear off and keep the schedule for future reference.

	8 weeks	16 weeks	32 weeks	Totals
1 st child				
2 nd child (10%off)				
3 rd child (10%off)				
			Subtotal	
			\$50 per Child annual Membership Fee	
			Total	

Payment Policy.

Fees must be up to date prior to the beginning of each new session. **Any late payments will be subject to 10% late fee.** All fees are non-refundable; however they can be credited to another family member during the same session.

Under no circumstances will missed classes be credited to a new session. A \$30 Charge will be applied to all returned checks.

Make-up Policy

Students may make up a missed class by attending any regular scheduled class of the same level. Please call if you intend to make-up a class. Missed classes may not be credited to succeeding sessions and no monetary reimbursements are applicable for classes not attended or mad- up. In addition, make-ups should be done in the same session as the absence. Make-ups may not be done in a session for which you are not registered.

Appropriate Attire

Children should dress properly for class. Boys should wear shorts or gym pants and a tee-Shirt. Girls should wear leotards. Bicycle shorts permitted. Gymnastics slippers are optional for all students.

Signature _____ **Date** _____

For Office use only	Session I	Session II	Session III	Session IV

Tuition Schedule 2009 - 2010

<u>Class Title</u>		<u>Session</u> 8 weeks	<u>Half year</u> 16 weeks	<u>Full Year</u> 32 weeks
Tiny Tumblers (2-3 years old)	35 minutes	128	218	403
Mini Buffs (3½- 4 years old)	45 minutes	130	244	437
Tumble Buffs (4½- 5 years old)	45 minutes	130	244	437
Mighty Mites (5 Years old)	60 minutes	150	286	538
Gym fit (by tryouts/invitations, 4-5)	75 minutes	193	365	689
Beg/ Adv beginner (6-14 years old)	75 minutes	193	365	689
Intermediate (6-15 years old)	90 minutes	210	386	706
Adv. Intermediate (6-15 years old)	120 minutes	252	479	890

Cross training (12-15 years old) 60 minutes- 25 per lesson, Fitness Card: 220=10 lesson, 400=20 lesson

Session calendar 2009-2010

<u>DAY</u>	<u>SESSION I</u>	<u>SESSION II</u>	<u>SESSION III</u>	<u>SESSION IV</u>
Sunday	Sept 20- Nov	Nov 15- Jan 10 No Class 12/27	Jan 17- March 14 No Class 2/14	March 21- May 23 No Class 4/4
Monday	Sept 21- Nov 16 No Class 9/28	Nov 23- Jan 18 No Class 12/28	Jan 25- March 22 No Class 2/15&3/29	April 12- Jun 7 No Class 4/5&5/3
Tuesday	Sept 22- Nov 10	Nov 17- Jan 12 No Class 12/29	Jan 19- March 16 No Class 2/16	March 23- May 12 No Class 3/30
Wednesday	Sept 23- Nov 11	Nov 18- Jan 13 No Class 12/30	Jan 20- March 10	March 17- May 12 No Class 3/31
Thursday	Sept 24- Nov 12	Nov 19- Jan 28 No Class 11/26& 12/24& 12/31	Feb 4- March 25 No Class 4/1	April 18- June 3 No Class 5/27
Friday	Sept 25- Nov 13	Nov 20- Jan 29 No Class 11/26& 12/25& 1/1	Feb 5- March 26 No Class 4/2	April 19- June 4 No Class 5/28
Saturday	Sept 26- Nov 14	Nov 21- Jan 23 No Class 11/28 & 12/26	Jan 30- March 27 No Class 2/13& 4/3	April 10- June 5 No Class 5/29

Keep This Half For Future Reference

THE GYM

Child 1:

Last Name: _____ First Name: _____

Male/Female: M / F Date of Birth: _____ Grade: _____ Years of Gymnastics: _____

Parent / Guardian Name: _____ Shoe Size: _____

Street Address _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email address: _____

Emergency Contact (Name/Relationship/Phone):

Physician (Name / Address / Phone):

Please Enroll my Child for:

Class Title: _____ Day: _____ Time: _____

Child 2:

Last Name: _____ First Name: _____

Male/Female: M / F Date of Birth: _____ Grade: _____ Years of Gymnastics: _____

Shoe Size: _____

Physician (Name / Address / Phone):

Please Enroll my Child for:

Class Title: _____ Day: _____ Time: _____

Remarks (any additional information you feel we should know about your child/children)

Parent Authorization:

I hereby certify that my child/children is/are in good health, has/have received all standard immunizations, is/are physically capable of participating and have my permission to engage in all prescribed gymnastic activities except as noted in the "remarks" section above. I assume all ordinary risks when the facilities are used and agree not to hold The Gym, Inc. or any of its instructors or employees liable for injury or damage which may occur to me or my child/children as a result of my/our participation in classes or related activities. I hereby release The Gym, Inc. it's affiliates, agents, and employees for liability due to accidents while participating in activities at The Gym, Inc.

Signature: _____ Date: _____

Toddler, Preschool, and Kindergarten Schedule

Day	<u>Tiny Tumblers—24 months w/parent</u>	<u>Tumble Buffs—3 ^{1/2} to 4 ^{1/2} Years</u>	<u>Mighty Mights 4 ^{1/2} to 5 ^{1/2} years</u>	<u>Mini Bufs 4 ^{1/2} to 5 ^{1/2} years</u>
Monday	11:15 to 11:50 am	4:15 to 5:00 pm 5:45 to 6:30 pm	9:30 to 10:30 am 4:30 to 5:30 pm 5:45 to 6:45 pm	
Tuesday	11:15 to 11:50 am	4:15 to 5:00 pm	9:30 to 10:30 am 1:00 to 2:00 pm 4:30 to 5:30 pm	
Wednesday	11:15 to 11:50 am	11:15 to 12:00 pm 4:15 to 5:00 pm	9:30 to 10:30 am 1:00 to 2:00 pm 4:30 to 5:30 pm	11:15 to 12:00 am
Thursday		11:15 to 12:00 pm 5:45 to 6:30 pm	9:30 to 10:30 am 1:00 to 2:00 pm 4:30 to 5:30 pm 5:45 to 6:45 pm	11:15 to 12:00 am
Friday				11:15 to 12:00 am
Saturday	9:15 to 9:50 am	9:15 to 10:00 am	9:30 to 10:30 am	9:15 to 10:00 am
Sunday	9:15 to 9:50 am	9:15 to 10:00 am	9:30 to 10:30 am	9:15 to 10:00 am

Primary and Secondary Schedule

Day	<u>Beginner / Advanced Beginner</u> <u>Ages 6 to 7</u>	<u>Beginner / Advanced Beginner</u> <u>Ages 8 to 10</u>	<u>Beginner / Advanced Beginner</u> <u>Ages 11 to 13</u>
Monday	4:15 to 5:30 pm	5:30 to 6:45 pm	6:30 to 7:45 pm
Tuesday	4:15 to 5:30 pm	5:30 to 6:45 pm	
Wednesday	4:15 to 5:30 pm	5:30 to 6:45 pm	6:30 to 7:45 pm
Thursday	4:15 to 5:30 pm	5:30 to 6:45 pm	6:30 to 7:45 pm
Friday	4:15 to 5:30 pm	4:15 to 5:30 pm	

Saturday	9:30 to 10:45 am	9:00 to 10:15 am	10:00—11:15 am
Sunday	9:30 to 10:45 am	9:30 to 10:45 am	10:00 to 11:15 am
Primary and Secondary Schedule			
Day	<u>Intermediate</u> <u>Ages 6 to 7</u>	<u>Intermediate</u> <u>Ages 8 to 11</u>	<u>Intermediate</u> <u>Ages 12 to 14</u>
Monday	4:15 to 5:45 pm	5:30 to 7:00 pm	6:30 to 8:00 pm
Tuesday	4:15 to 5:45 pm	5:30 to 7:00 pm	6:30 to 8:00 pm
Wednesday	4:15 to 5:45 pm	5:30 to 7:00 pm	
Thursday	4:15 to 5:45 pm	5:30 to 7:00 pm	6:30 to 8:00 pm
Friday	4:15 to 5:45 pm	4:15 to 5:45 pm	
Saturday	9:30 to 11:00 am	9:00 to 10:30 am	10:00—11:30 am
Sunday	9:30 to 11:00 am	9:30 to 11:00 am	10:00 to 11:30 am