



PIONEER GYMNASTICS

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2018 * GYMNASTICS CAMP * 2018

Pioneer Gymnastics Camp session will be August 6th thru 10th from 9:00am to 3:00pm. The cost is \$165.00 per gymnast. Each day will include rotations at all four (4) girls' events & six (6) events for the boys. These events include: beams, vaulting, uneven bars and spring floor for the girls. The boys have the pommel horse, rings, even parallel bars, high bar, vaulting and spring floor. Also included will be a 30' Tumbler Trak, dance, strengthening, open gym time, games and so much more.

We want to stress upon each gymnast the safety factors as well as the proper technique in all the skills, strengthening and flexibility on each apparatus. This is to make gymnastics the fun and very challenging sport we all love.

Each gymnast will need to bring his/her own lunch, snack and water bottle. We have a refrigerator / freezer for any lunches or foods that need to be kept cold or frozen. There will be a short snack time in the am, then lunch, then short snack in the pm.

SCHEDULE

WARM – UP AND CONDITIONING FIRST ROTATION SECOND ROTATION GAMES THIRD ROTATION LUNCH ARTS & CRAFTS	OPEN WORK-OUT FOURTH ROTATION FIFTH ROTATION SHORT BREAK SIXTH ROTATION STRENGTHENING DISMISSAL
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----- CUT HERE, ATTACH PAYMENT AND RETURN WITH THIS LOWER PORTION -----

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2018 SUMMER CAMP AUGUST 6th THRU AUGUST 10th 2018

Gymnast's Last Name _____ First Name _____ DOB _____

Gymnast's Age _____ Age 6 (Must have been in the first grade or higher in the 2017 – 2018 Year) Thru age 17

Address _____

Parent's Name _____ Parent's Phone # _____

E-mail Address _____ E-mail belonging to _____

Relative's / Friend's Name _____ Relative's / Friend's # _____

State Any And All Physical Restrictions, Medical Restrictions, Allergies, Etc. _____

If There Is Any Medication(s) To Be Taken During Camp Time,
Please Give Both Verbal And Written Special Instructions Attached With This Registration Form.

**My daughter / son has my permission to participate in the Pioneer Gymnastics Summer Programs.
I further release, absolve, indemnify and hold harmless Pioneer Gymnastics and its staff of any bodily
injury and / or death that may occur and any type of emergency to my daughter / son during said program.**

Parent's Signature _____ Parent's Name (Printed) _____

(My signature shows that I have read, understand, and agree to all of the above.) Date _____