

SUMMER DAY CAMP 2010

*"The all inclusive Day Camp
that has it all"*



Ages
4 to 14

Camps Run From
June 14 to August 27
Full Day
9:00 am to 5:00 pm
Extended Day
7:30 am to 6:00 pm
Half Day Available
7:30 to 12:30 or
12:30 to 6:00

Special Activities

- Gymnastics
- Trampoline
- Arts & Crafts
- Camp Carnival
- Water Fun
- 40' ZIP line
- Trapeze swing

NEW FOR 2010
Children's boot camp!
Tues. & Thurs.

One full week only \$115
Sports & activities that
keep your child moving
all summer!

Sports

- Gymnastics
- Golf
- Soccer
- Track & Field
- Volleyball
- Bowling
- Tumbling

It's All About
The Fun!



Charter Oak Gymnastics Inc.
841 N. Dodsworth Ave.
Covina, Ca.

Call for more information
626-966-8775

www.glidersgymnastics.com



CHARTER OAK GYMNASTICS KIDS SUMMER DAY CAMP It's Time For An Active Summer!

WELCOME TO OUR GYM!

Charter Oak Gymnastics would like to thank you for your interest in our day camp program. We have been teaching children since 1976. We are looking forward to the opportunity of working with you and your child.



HOURS & FEES

HALF DAY CAMPERS	7:30 AM – 12:30 PM	or	
	12:30 AM – 6:00 PM		\$ 75 per week
FULL DAY CAMPERS	9:00 AM – 5:00 PM		\$115 per week
EXTENDED CAMP	7:30 AM – 6:00 PM		\$145 per week
SINGLE DAY PRICE	7:30 AM – 6:00 PM		\$ 35 per day*

ALL PRICES & ENROLLMENT ACCEPTANCE ARE WITH A MINIMUM OF 24 NOTICE

*requires pre registration - \$45 single day walk in price.
(We need time to schedule our coaches)

PAYMENTS

Payment must be received the 1st day of your child's camp for each week. A guaranteed form of payment in the form of a credit card for day camp is **required** on the registration form. If a check or cash payment is not received by last day of your child's camp week your credit card will be charged.

- A 10% discount for additional siblings.
- The above discounted price is for one full week or 5 separate days of camp paid in full. No other discounts on pricing except for those stated above.

ARRIVAL & PICK-UPS

1. Parents are never to drop off children outside the gym. Children must be signed in daily by an adult.
2. Children dropped off and or not picked up on time will be checked into extended camp at a cost of \$30.00 per week. The grace period is 15 minutes.
3. If a child becomes ill during the day, the parent will be notified and expected to arrange for alternative care.
4. Your child will not be released to anyone other than the parent or other persons on the emergency card.
5. The camp ends promptly at 12:30 PM, 5:00 PM or 6:00PM. Please be prompt in picking up your child(ren).
6. Extended camp closes promptly at 6:00 PM. Children not picked up by 6:00 PM will be charged \$1.00 for every minute after 6:00 PM.

LUNCH

All campers must bring a lunch on days that lunch is not provided with the fieldtrip. There is a refrigerator available to store lunches and a microwave to warm up lunches if needed. A soda machine is also available for your convenience at a cost of \$1.00.

FIELD TRIPS

All field trips must be paid for in the office before the day of the field trip. All parents must fill out a field trip release form - (on your enrollment form). We will take parent volunteers and there will be a sign up sheet in the camp room every Monday; with the trip times, cost, and any special requests.

HEALTH

We are not equipped to care for an ill child. If a child becomes ill during the day, the parent will be notified and expected to arrange for alternative care. If a child requires prescription medication during the day, the parent must have required forms completed (At your request if needed.)

CLOTHING

Each child should be dressed in comfortable clothes (shorts and T-shirt or leotards). While in the gym the children will be barefoot.

JEWELRY

Necklaces are not allowed in the gym. Earrings are to be studs or similar type.

HAIR

Hair needs to be pulled back for safety reasons.

EMERGENCIES

In case of a major earthquake or evacuation, children will be taken to the Covina fire station located at 1577 Cypress in the City of Covina, (626) 858-5512.

GUIDELINES

Please fill out all the necessary paperwork with times and weeks of planned attendance so we can staff properly. We need time to set up appropriate staffing.

If your child(ren) is going to be absent for the day, please call in and notify the office.

No gum is allowed in the gym. Food is to be consumed in the designated area only.

Charter Oak Gymnastics Inc. reserves the right to alter the schedule without notice. These guidelines are to help ensure a positive experience for your child.

If you have any questions, please feel free to call the office at (626) 966-8775.

ACTIVITIES

Physical activity will be the primary focus of our camp. Campers will also spend time with crafts, games and rest time in our camp room. The following list is an example & guideline to our daily schedule.

Kids Sport Day Camp Monday- Friday Sample Schedule

(except field trips & Tues. & Thurs. Boot camp workout)

Time	Group #1	Group #2	Group #3
7:30am—8:15am	Extended care drop off	Extended care drop off	Extended care drop off
8:15am—9:00 am	Table Games	Table Games	Table Games
9:00am-9:15am	Prepare For Activities	Prepare For Activities	Prepare For Activities
9:15am-10:00am	Gymnastics	Sport 2	Special Activity
10:00am—10:45am	Special Activity	Special Activity	Sport 2
10:45am—11:00am	Snack Time	Snack Time	Snack Time
11:00am—11:45am	Free Play Time In Gym	Free Play Time In Gym	Free Play Time In Gym
11:45am-12:30pm	Sport 2	Gymnastics	Lunch
12:30pm—1:00pm	Lunch	Lunch	Sport 1
1:00pm—1:45pm	Game Time	Sport 1	Gymnastics
1:45pm—2:30pm	Sport 1	Game Time	Trampoline
2:30pm-3:15 pm	Free Play Time in Gym	Free Play Time in Gym	Free Play Time In Gym
3:15pm-3:30pm	Snack	Snack	Game Time (until 3:45)
3:30pm-4:00pm	Trampoline	Trampoline	Snack
4:00pm—6:00pm	Movie – extended care	Movie – extended care	Movie – extended care

KIDS SPORTS WEEKLY SCHEDULED SPORTS & ACTIVITY

	SPORT 1	SPORT 2
June 14 – 18	Track & Field	Soccer
June 21– 25	Dance Fun	Volleyball
June 28 – July 2	Drama	Bowling
July 5 – 9	Golf	Track & Field
July 12 – 16	Cheerleading	Soccer
July 19 – 23	Dance – Fun & hip moves	Drama
July 26 – 30	Track & Field	Volleyball
August 2 – 6	Cheerleading	Bowling
August 9 – 13	Dance – Fun & hip moves	Soccer
August 16 – 20	Volleyball	Basketball
August 23 – 27	Golf	Bowling

Charter Oak Gymnastics Inc.
841 N. Dodsworth Ave. Covina, Ca. 91724
(626) 966-8775 Fax (626) 967-8838
2010 Summer Registration

	Wk 1	Wk 2	Wk 3	Wk 4	Wk 5	Wk 6	Wk 7	Wk 8	Wk 9	Wk 10	Wk 11
	6/14-6/18	6/21-6/25	6/28-7/2	7/5-7/9	7/12-7/16	7/19-7/23	7/26-7/30	8/2-8/6	8/9-8/13	8/16-8/20	8/23-8/27
Mon	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____
Tues	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____
Wed	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____
Thurs	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____
Fri	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____	F____ H____
Extend Care	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO

Kids Sports Day Camp Open To Ages 4-14 (Must Be Potty Trained)
Camp Scheduled Activities Begin @ 9:00am
Drop Off As Early As 7:30am (Extended Care fee will be applied) \$30 fee per week
Half Day Camper 7:30am—12:30pm or 12:30pm—6:00pm (Bring Lunch, Drink)
Full Day Campers 9:00am—5:00pm (Bring Lunch & Drink)

I hereby authorize the staff of Charter Oak Gymnastics to act for me according to their best judgment in any emergency requiring medical attention and hereby waive & release the staff of Charter Oak Gymnastics from any and all liabilities for any injuries or illnesses incurred while at camp. I understand that participation in gymnastics and other sports/activities involves motion and as such carries with the risk of injury or death. The camp is not responsible for personal items that are lost, stolen or damaged. All medical expenses incurred will be the responsibility of the camper's parents/guardian. In lieu of medical certificate signed by a medical doctor, I have no knowledge of any physical or mental impairment that would be affected by the named camper's participation in the camp program. I also understand and agree the Camp retains the right to use any photographs, videotapes, motion picture recordings, or any other record of this event for publicity, advertising or any legitimate purpose.

Parent Signature _____ Date _____

Child's Name _____ DOB _____ Gender _____

Parents Mother _____ Father _____

Social Security _____ - _____ - _____

Home Phone (_____) _____ - _____ Cell Phone (_____) _____ - _____

Address _____

City _____ State _____ Zip _____

Emergency Contact Name _____ Phone(_____) _____ - _____

I understand and agree I will be charged for those days and weeks I am registering for. Credits or refunds will not be given for missed days.

Credit Card Information Required Name on Card _____

Card # _____ Expiration Date _____

I understand and agree my credit card will be charged for all balances due on my account according to the policies.

Signature _____ Date _____

PLEASE READ & COMPLETE THE BACK SIDE OF THIS FORM

Camp & Field Trip WAIVER AND RELEASE OF LIABILITY

DISCLAIMER: CHARTER OAK GYMNASTICS, INC. IS NOT RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON WHILE PRACTICING, TAKING CLASS, COMPETING, PARTICIPATING IN OPEN GYM, DAY CAMP, FIELD TRIPS OR IN ANY OTHER WAY INVOLVED IN GYMNASTICS, SPORTING ACTIVITIES OR PRESCHOOL CLASSES AT CHARTER OAK GYMNASTICS, INC. FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF CHARTER OAK GYMNASTICS, INC., ITS OWNERS, OFFICERS, AGENTS, OR EMPLOYEES.

In consideration of my participation, I hereby release and covenant not-to-sue Charter Oak Gymnastic, Inc., the Charter Oak Gymnastics Board of Directors and officers, the Charter Oak Gymnastics Booster Club, and any of their employees, teachers, coaches, or agents, from any and all present and future claims resulting from ordinary negligence on the part of Charter Oak Gymnastics, Inc., or others listed for property damage, personal injury, or wrongful death, arising as a result of my engaging in or receiving instruction in gymnastics, cheerleading, or any other activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future that may be made by family estate heirs, assigns, or me.

Further, I am aware that gymnastics and sport activities are vigorous sporting activities involving height and rotation in a unique environment and as such they pose a risk of injury. I understand that gymnastics, sport activities, and related activities always involve certain risks, including but not limited to, death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and serious injury to virtually all bones, joints, muscles, and internal organs, and the mats, pits, and other safety equipment and apparatus provided for my protection including the active participation of a coach or teacher who will spot or assist in the performance of certain skills, may be inadequate to prevent serious injury. The risk of harm may be limited by all of the safety equipment and trained coaches, but never eliminated. I understand that participation in gymnastics, including moving from event to event, conditioning, stretching and other activities which may leave me vulnerable to the reckless actions of their participants who may not have complete control over their actions or who may not see other students in the gym. I am voluntarily participating in this activity with knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

I further agree to indemnify and hold harmless Charter Oak Gymnastics, Inc. and all others listed for any and all claims arising as a result of my engaging in or receiving instruction in Charter Oak Gymnastics, Inc. activities or any activities incidental thereto, whenever, wherever, or however the same may occur.

I understand that this waiver is intended to be as broad and as inclusive as permitted by the laws of the state of California and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be within the state of California.

I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and or remedies which may be available to me for the ordinary negligence of Charter Oak Gymnastics, Inc. or any person listed above.

Child's name _____ Birthday _____

Address

City

Zip Code

Charter Oak Gymnastics
Kids Sports Day Camp Student & Medical Information
(All Information Very Important-Please Fill Out Completely)

Child's Name _____

DOB _____ Age _____ M or F _____

Parent's name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ - _____ - _____

Work Phone _____ - _____ - _____

Cell Phone _____ - _____ - _____

Medical Restrictions _____

Medications _____

Medical Conditions _____

Medications _____

Special Instructions _____

Child's Primary Insurance _____

(Please provide a copy of Insurance Card)

Physician

Telephone # _____ - _____ - _____

I hereby give consent for Charter Oak Gymnastics to provide customary medical/athletic attentions, transportation and emergency medical services as warranty in the course of my child's participation at Charter Oak Gymnastics. I will maintain and uphold up-to-date primary medical health insurance during the entire camp enrollment at Charter Oak Gymnastics Inc.

Parent/Legal Guardian Signature:

Date:

Charter Oak Gymnastics

Kids Sports Day Camp Medical Release Form cont...

Very Important: Signing your child IN and OUT of day camp is very important. The child is not allowed to sign themselves in or out. Only the parent or authorized person is permitted to Sign In and Sign Out. If an authorized person is picking up your child please note this on the Sign In Form and notify the receptionist when you Sign In. If a person is picking up that is not on the authorized persons list we will not release the child without written permission from the parent.

Code Word _____

(This word is a word only you, your child and the authorized persons know to verify your authorization for them to pick up your child when you cannot. Persons other than parent will be required to produce driver's license as identification)

Additionally Authorized Persons:

Name _____

DL # _____ - _____ - _____

Name _____

DL # _____ - _____ - _____

Other Emergency Contacts: Name _____

Phone # (_____) _____ - _____

Cell # (_____) _____ - _____

Name _____

Phone # (_____) _____ - _____

Cell # (_____) _____ - _____