



Registration Form First name: DOB:d/m/y Last name: Cell Telephone: Res. Bus (opt) Parent' first name: E-mail Health card # Allergies: Any other relevant information you feel we should know Are you registered with Toronto Aspirals for 2017-2018 season? Yes No Are you registered with another Rhythmic Gymnastics club in Ontario? Yes No (if yes, please provide your GO registration number) If the answer is NO to both questions, you have to pay \$35 registration fee in addition to your camp fee. Waiver: The undersigned hereby agrees to hold Toronto Aspirals Rhythmic Gymnastics Centre, Gymnastics Ontario. YCDSB, YRDSB harmless from any and all injuries arising out of the activities at any facility at any time or use of equipment, whether accidental or otherwise Signature : Parent Name: Date:

Weeks	Length	Payments	Program	Age	Note
Wk #1 July 10-14 Wk #2: July 17-21 Wk #2: July 24-28	Full day: 9am -4pm Full day: 9am-4pm Full day: 9am-4pm	Week :\$280 Three week package: \$800 (you save \$40) Siblings: 10% off One discount per family Extended Hours: 8-9am, 4-6pm:\$6/half hr \$10/hr	Interclub Provincial	6 to 16	
		All are invited. No commitment to join TA in the Fall required Must pay \$35 GO registration if not registered with GO.	P	in cash, e- cheque, p	an be made transfer or bayable to Aspirals

Week #	Dates	Ext Hrs indicate time		# kids	Fee	Extended Hrs fee	Total
Week 1	July 10-14	am	pm				
Week 2	July 17-21	am	pm				
Week 3	July 24-28	am	pm				

To register: print, fill out and sign this form. Calculate your fee. If need help with calculations,

call us at 905-760-0092

E-mail or bring this form along with full payment to the gym at 6 Bradwick Drive, Concord.

Notes:

- Campers bring lunch and two snacks.
- One or two bottles of water.
- Fridge and microwave available.
- All lunch bags should be labeled with child's name.
- Pizza is provided on Fridays