

# NOLA Gymnastics 2017 Summer Camps

Location: 1725 Dufossat, Newman Facilities Bldg

For Girls Ages 5-16, Beginner, Preteam + TEAM students welcome.

Drop off between 8:45 - 9:00am. Pick-up 3:00pm.

Campers must bring lunch, 1 snack and 2 drinks.

Girls must wear leotards, ponytail. No jewelry please.

**Tuition:** \$250/Weekly or \$50/day *Camp tuition is not refundable*

**Late Pick-up:** \$10 extra between 3:10 - 4:00pm (will bill you)

### Camp Program Includes:

Bars, Beam, Vault, Floor Exercises.

Junior Olympic Level 1,2,3, & 4 skill will be taught.

Ballet, Choreography and Dance Routine.

Acrobatics Video Instructions, Tumble Track.

Conditioning (running on the Football Field, Pilate, Yoga, Strengthening Skills & Drills)

Back Handspring Clinic, Salto Clinic.



**GRETCHEN SCHULTZ, Owner/Coach**  
3x US National Champion

**IVAN IVANOV, Head Coach**  
6x Bulgarian National Champion

**(504) 782.6462**

### Camp Sessions - circle Week(s) or Day(s) for which you are registering

Session	M	T	W	Th	F	Number of days
<b>Week 1</b>	June 5	6	7	8	9	_____ Days x \$50 = \$ _____
<b>Week 2</b>	June 12	13	14	15	16	_____ Days x \$50 = \$ _____
<b>Week 3</b>	June 19	20	21	22	23	_____ Days x \$50 = \$ _____
<b>Week 4</b>	June OFF	OFF	OFF	OFF	OFF	Closed all week
<b>Week 5</b>	July OFF	OFF	OFF	OFF	OFF	Closed all week
<b>Week 6</b>	July 10	11	12	13	14	_____ Days x \$50 = \$ _____
<b>Week 7</b>	July 17	18	19	20	21	_____ Days x \$50 = \$ _____
<b>Week 8</b>	July 24	25	26	27	28	_____ Days x \$50 = \$ _____
<b>Week 9</b>	Aug 31	1	2	3	4	_____ Days x \$50 = \$ _____
<b>Week 10</b>	Aug 7	8	9	10	11	_____ Days x \$50 = \$ _____

### Waiver and Permission

**Total \$** \_\_\_\_\_

I understand that this form must be completed and signed, and that all tuition fees must be paid in full before student can begin Summer Camps. We will refund tuition less a \$50 processing fee for cancellations BEFORE June 6, 2016. TUITION IS NOT REFUNDABLE WITHIN 14 DAYS OF CAMPER'S SESSION. Camp tuition is non-refundable but transferable, in case of illness only. Doctors note required. NOLA GYMNASTICS, LLC reserves the right to change a class instructor should the need arise. I understand that NOLA GYMNASTICS, LLC is not responsible for any personal items brought to our facility, or for any lost items. I agree that my child pictures may be used for NOLA Gymnastics website and advertising.

I understand that I am responsible for all medical expenses for myself and my child(ren) which may occur from our participation at NOLA Gymnastics LLC and Newman. As legal guardian of the student registered on this form, I hereby consent for him/her to participate in gymnastics classes conducted by NOLA Gymnastics, LLC. I recognize that any activity involving height or motion can create the possibility of serious injury. I hereby forever release NOLA Gymnastics LLC, Newman, NOLA Gymnastics LLC officers, directors, agents and employees from all liability for any and all damages and injuries suffered or contracted as a result of participation in gymnastics classes at NOLA Gymnastics, LLC. and Newman.

## Summer Camp Registration Form

(PLEASE PRINT)

Student's Name	DOB	Age
1		
2		
3		
4		

**Parent/Legal Guardian Name (First/Last)**  
\_\_\_\_\_

**Street Address:**  
\_\_\_\_\_

**City, State, Zip:**  
\_\_\_\_\_

**E-mail Address:**  
\_\_\_\_\_

**Phone:**  
\_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I can verify that the information provided is accurate & take responsibility for contacting office to update.

*Make Check Payable to*  
**NOLA Gymnastics**  
*Mail Registration & Payment To:*  
**NOLA Gymnastics**  
**6121 Hurst Street, NOLA 70118**

\$35 fee for any check returned by your bank

**Limited Space Available!**  
**Register Now!**

[WWW.NOLAGYMNASTICS.COM](http://WWW.NOLAGYMNASTICS.COM)



# NOLA Gymnastics LLC

1725 Dufossat St., New Orleans LA 70115

## RELEASE AND WAIVER OF LIABILITY

### ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

In consideration of being allowed to enter the gymnastics area and/or participate in any activity at NOLA Gymnastics LLC, the undersigned, on his or her behalf, and on the behalf of the participant(s) identified below, acknowledges and agrees to the following conditions.

I acknowledge that I am the parent or legal guardian of the child(ren) identified below and voluntarily authorize my child to participate in gymnastics activities at NOLA Gymnastics LLC. I understand that there are inherent dangers associated with gymnastics, and recognize that any physical activity involves risks of serious bodily injury or death, including but not limited to temporary or permanent muscular and skeletal injury and paralysis, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time. This could include, but not limited to stepping off uneven mats and twisting an ankle, broken bones, torn ligaments, spine injuries or even death. This includes outside the building in the parking lot and all surrounding areas. Physical activities at NOLA Gymnastics LLC will include, but are not limited to: Running, Jumping, Stretching, Twisting, Hanging, Pulling, Pushing, Forward & Backward rolls, Headstands, Handstands, Push-ups & Pull-ups, Falling & Sliding, Sit-ups. Students may hang upside down for extended periods, flip, spin, twist and land (or fall) on feet, hands or other body parts, sometimes in awkward positions. Conditioning can be strenuous and demanding. Such activities often result in joint, bone and muscle stress and fatigue, shortness of breath, sweating and accelerated heart rate. Advanced gymnasts will execute skills requiring high releases and increasingly more difficult dismounts. Knowing these risks, I and my child(ren) assume all risks, whether foreseen or unforeseen, in connection with my child participation in these activities. Parent/Guardian authorizes these supervised activities.

**Off-site Activities:** Often, NOLA Gymnastics LLC members will participate in off-site exhibitions, meets, fund-raisers or other activities ("offsite events"). Off-site events will involve the same or similar activities as referenced above. Condition of off-site facilities and/or equipment is not known by NOLA Gymnastics LLC staff. Though NOLA Gymnastics LLC staff will exercise due caution, we do not guarantee the safety of the off-site location and will not accept responsibility for injuries sustained during off-site events. Parent/Guardian is advised to exercise its own discretion in permitting child to take part in offsite activities. Parent/Guardian agrees to hold NOLA Gymnastics LLC and its employees harmless from accidents or injuries that occur at off-site locations.

I hereby release, discharge and covenant not to sue NOLA Gymnastics LLC, its respective administrators, directors, agents, officers, members, volunteers and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands losses or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes claim against any of the Releasees I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may occur as the result of such claim.

**Medical Release:** I fully understand that the staff of NOLA Gymnastics LLC are not physicians or medical practitioners of any kind. With that in mind, I Hereby authorize and give my consent to NOLA Gymnastics LLC including any of its instructors or other authorized employees to provide emergency medical care and to give authority to any emergency unit, hospital or doctor to render immediate aid as might be required for the treatment of the above named student in the event of any emergency either on the premises of NOLA Gymnastics LLC or during the course of any sports event involving the student as a NOLA Gymnastics LLC participant.

**Media Release:** By attending open gym, events, meets, off-site meets or events, birthday party, or classes at NOLA Gymnastics LLC, I hereby grant to NOLA Gymnastics LLC the absolute right and permission to copyright, publish, and use photographic portraits, pictures, audio, videos, audio taped or photographed by any means and grant full use of my child's likeness, voice and words without compensation to me or the participant(s).

**I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN NOLA GYMNASTICS LLC AND ME, AND I HAVE SIGNED IT OF MY OWN FREE WILL.**

Participant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name (Please Print): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_