



## SUMMER GYMNASTICS CLASSES

Ages 2 1/2 and up

**Dance/Warm-up Routines \* Scarf and Hoop Routines**  
**Tumbling \* Cheese Mat \* Mailbox Mat \* Octagon Mat**  
**Balance Beam \* Parachute \* Fun Tunnel \* Soft Steps \* Parachute**  
**Stretching and Conditioning Exercises \* Creative Movement Activities**

Junior Gym is a quality gymnastics program offered in area schools and preschools. We believe it is important to build a sound basis for physical activity in the early years. Ours is a fun and positive program which will teach your child gymnastics and movement basics. It is designed to improve your child's gross motor skills, coordination, balance, strength, flexibility and body awareness.

Our summer session will consist of classes for June and July. The discounted rate for the summer session is \$70. Please visit [jrgymtally.com](http://jrgymtally.com) for more information, and to make an online payment. You may also leave a payment at your child's school. If your child is already in the Junior Gym program, you do not need to fill out this registration form, unless your information has changed.

The program is directed by Ashley Peeples. If you have any questions, you can reach Ashley by email at [ashley@jrgymtally.com](mailto:ashley@jrgymtally.com) or call 850-445-1491. Enjoy the convenience of this quality program brought to your child's school. To register, complete a registration form and return it to the school, along with your payment.

**No registration fee for the summer session!!**

### JUNIOR GYM GYMNASTICS REGISTRATION

Child's Name \_\_\_\_\_ School \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_

Mother-Work \_\_\_\_\_ Cell \_\_\_\_\_

Father-Work \_\_\_\_\_ Cell \_\_\_\_\_

Child's Age \_\_\_\_\_ Child's Birth Date \_\_\_\_\_

Email Address: \_\_\_\_\_

Please clearly explain any disabilities or health problems your child has, and any limitations they may impose:

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My son/daughter \_\_\_\_\_ has my permission to participate in the "Junior Gym" gymnastics program. I understand that by participating in this activity, there is a possibility of accidental physical injury. I agree to assume the risk of any adverse effects on him/her due to participation in this activity.

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_