

Legacy Gymnastics



Mini Camps 2024



Legacy Gymnastics will be running several specialized mini camps this summer!

Gymnastics – July 9-11/ July 30- Aug 1

Tumbling – June 25-27 / August 6-8

Cheer – July 23-26/August 13-15

Ninja – July 16-18 / August 20-22

Camps will run 9 am – 12:30 pm



Pricing

1st Camp - \$165

2nd camp - \$145

3rd camp and beyond - \$130



It is best to send children with a backpack to keep all of their belongings organized and together.

Please remember to send with them all of the following items EVERYDAY:

Water Bottle – Snack – Lunch – Change of Clothes

MINIMUM AGE FOR CAMP IS 5 YEARS OLD

\$10 Registration fee for non-members

NO REFUNDS & NO MAKE-UPS FOR CAMP DAYS

Attire:

*Leotards, shorts, leggings, t-shirt,
tank top, hair tied back*

*Jeans or clothes with buttons
should not be worn*

Absolutely no jewelry

PAYMENT OPTIONS

We accept cash, checks, debit and
all major credit cards.

1876 Lakewood Road Toms River NJ 08755
732-646-4393 legacygymnasticsnj@gmail.com



Legacy Gymnastics

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Summer Camp Registration Form

Camper Name: _____ Birthdate: _____ Age: _____ Sex: _____

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Camper Name: _____ Birthdate: _____ Age: _____ Sex: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____ Email: _____

Special Medical Problems: _____

Mother/Father (Names & Phone #'s) : _____

Please Circle the camp(s) your child(ren) will be attending.

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Official Use ONLY:	TUITION
Tuition: _____	Reg Fee (non-members): _____
Date: _____	
MOP: _____	

I understand that there are **NO REFUNDS/MAKE-UPS/SWITCHING DAYS** after the deposit is made.

I/We the parent/legal guardian(s) of _____ realize and acknowledge that gymnastics is a physical activity involving potential risk to the participant and agrees to hold harmless and indemnify Legacy Gymnastics, its instructors, employees, officers, directors, and agents from any and all claims including, but not limited to, those arising from negligence. Any special medical conditions which might affect our child's participation in class has been indicated.

I further acknowledge, understand, appreciate and agree that my participation may result in possible exposure to and illness from infectious diseases, including, but not limited to, MRSA, Influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees or others, and assume full responsibility for my participation and exposure.

MEDICAL RELEASE: I give permission for Legacy Gymnastics staff to give my child simple first aid or to be transported to a hospital to receive emergency medical treatment.

PHOTO RELEASE: I give permission for Legacy Gymnastics to take and use pictures of my child/children for business-related purposes only. These pictures may be posted to Legacy Gymnastics social media accounts.

*AGREED TO BY (parent/guardian): _____ Date: _____