Holiday Camp 2024

Child's Name:	Child's Age:	
I understand that I am	not allowed to bring a sick child with a few	ver over 100.4 to
Summer Camp.		
Initials: Date: _		
**********	*************	*****
I understand that drop o	ff is as early as 8:00 AM, and that pick-up is a	s late as 6:00PM. If
he/she has a fever over 10	00.4 please keep him/her at home. If I am lat	e picking up my child,
I will be charged \$1.00 ((per child) every minute I am late. The clock i	n the lobby is used to
determine time. Initials: _	Date:	
**********	***************	*****
I understand that I must	register online for camp. If you are a walking	, the cost is \$5 extra
The link is found on the h	omepage of www.gymsouth.com. Initials	Date
There are NO refunds.	You are paying for your child's spot in camp. I	also acknowledge to
pay a \$20 registration fee	if I have not paid a registration fee in the pas	t 12 months. Initials:
Date:		
**********	*************	*****
I, ackr	nowledge that I have been informed that this	program is not a
licensed child care facility	v. I also understand this program is not requir	ed to be licensed by
the Georgia Department o	of Early Care and Learning and this program i	s exempt from state
licensure requirements.		
Signature	Date	

I understand that my child will be going to Your Pie Pizza and Tinseltown Movie Theater for their field trips on Wednesdays. The cost for the pizza on Wednesdays will be \$10.50. The cost for pizza on Monday, Tuesday, Thursday & Friday will be \$8. I have the option of buying my child a snack pack for the movies and the cost is \$7 CASH ONLY. There is an extra \$5 fee for the movies on Wednesdays.

Signature ______ Date ______

I have read and will comply with all of the above statements.				
Parent Name (please print):				
Parent Signature:		Date	-	
Students Name:	M / F	Birthday:		
Email:	Home Pho	ne:		
Address:	City	7 :	Zip:	
School:				
Mother's Name:	Cell #:	Work #:	:	
Father's Name:	Cell #:	Work #	:	
Person to contact if parent is unavailable:				
Relation:	Phone #:			
Other family members enrolled at Gym Sou	ıth:			
Family Doctor:	Dr.	s #:		
Medical Insurance Co:	Pol	icy #:		
How did you hear about Gym South?				

Day Camp Registration Form

Please Note Gym South Policies (Please initial before each line)
I acknowledge that I must pay a \$20 registration fee if I have not paid one in the past 12 monthsIt is the parent/guardian's responsibility to see that his/her child is picked up by 6 PM. Anyone
picking up a child must know the password or show a photo ID. If you need to have someone other
than those persons listed in your camp packet pick up your child, please call the gym, notify them of
the change and give that person the password. That person should also be prepared to show a photo
ID.
I understand that the fee for LATE PICKUP IS \$1 FOR EACH MINUTE PER CHILD.
All sessions that contain a holiday will be prorated for the days affected, so no credit/make-up
will be needed.
Camp activities begin at 9 AM with a warm-up/stretch and end at 4 PM after snack.
I understand that the hours of 8:00-9 AM and 4-6 PM are considered extended care, and there is
no extra cost.
THERE ARE NO REFUNDS. You are paying for your child's spot in camp.
I understand I am responsible for packing a lunch AND snack for my child, or you can order Your
Pie Pizza for \$8 on Monday, Tuesday, Thursday & Friday.
I have read and understand the camp discipline policies and procedures.
Children may not bring toys from home. If electronics (Gameboy, phone, ipod, etc) are brought to
camp, they may be used during the hours of 8:00-9 am and 4-6 pm ONLY. From 9-4 pm the items
MUST be at the front desk. If a child brings these items without our knowledge, they will be taken
away and returned when a parent/guardian picks them up. Please label items.
Children Must Not Have Any Money in their possession or with their items stored in the blue
cubbies.
Children should not bring any valuables to camp. GYM SOUTH IS NOT RESPONSIBLE FOR LOST
OR STOLEN ITEMS.
Our emphasis and energies are ALWAYS on safety first, but please remember that gymnastics is
a potentially dangerous sport. Any activity, motion, rotation, or height creates a possibility of
serious accidental injury.
By initialing above & below, I understand these important Policies of Gym South and agree to ${\sf Policies}$ of Gym South and agree to
abide by them. Initials:
I certify that my child, has had a physical exam in the past year on or around / /
and is in good physical health. I have been informed by J.R. & S.T. Inc. (Gym South) does not carry a
supplemental insurance policy and that it is my responsibility to carry adequate health insurance
and pay any additional medical fees not covered by my health insurance. Any activity involving
motion, height or water creates the possibility of serious injury. I agree that Gym South may approve
transport in case of an emergency. Also, my child may have his/her picture taken during activities
where appropriate.
Signed:Date:

MEDICAL INFORMATION

Child Name:		
Please list below any allergies that your ch	ild may have (food, medicine, insect	t bites, etc.)
ALLERGY	INSTRUCTIONS	
If your child will be taking any medicati medication in a container or sandwich be giving the medication. Please list below any illnesses or condit	pag containing the child's name a	f know and place the
	RGENCY RELEASE	
In the event of an emergency, I	allow my child,	to be taken to
Fayette Medical Center to be examined for	his/her injuries. My insurance carri	ier is
and my policy number i	s If you have any qu	estions, please call me
at or Tha	nk you.	
Parent's Signature		

PARENTAL CONSENT RELEASE

In order to provide a safe environment for all children in summer camp, we require identification **and/or** a personal password from anybody, who picks up a child. Please list all persons who have your permission to check your child out of summer camp. If someone is NOT on this list, they will not be able to pick up your child. Please list yourself and your spouse. **The password is something you, as the parent/guardian creates.**

*Child's Name:		
*Personal Password:		
*Parent's Names:		
Additional Individual Conser	ted to Pick-up	
1	2	
3	4	
5		
*Parent's Signature:		
*Email:		
It is YOUR responsibility to	notify these people of our I	D requirements and your password
PARENTAL AGREEMENT		
This is to certify that Gym So	uth has informed you that we	DO NOT CHARGE extra for extended
care from 8:00-9:00 AM and	4:00-6:00 PM. We DO CHARG	E a late fee of \$1.00 (per child) every
minute you are late picking u	p your child. The clock in the	obby determines the time.
Parent's Signature:	Date:	

A few more rules and changes we are implementing...

- 1. All camp registration will need to occur online through our registration portal on our website. All forms will need to be filled out and emailed to the gym prior to your child attending Gym South. If you have problems with accessing this information, please either email Cherone at cherone@gymsouth.com or Andrea at andrea@gymsouth.com.
- 2. You should also take your child's temperature before coming to the gym each day.

- 3. We have adjusted the camp drop-off time to 8:00-9:00 am, but we will still offer the extended pick up time from 4-6 pm.
- 4. If your child has class, please inform the front desk.
- 5. It is important that your child washes their hands with soap and water before coming to camp for the day.
- 6. We will not allow any shoes on any carpeted surfaces.
- 7. Our staff members ARE NOT REQUIRED TO WEAR masks when working with the campers. We will evaluate this policy on a weekly basis.
- 8. The water fountain will be available. You can bring the camper with their own water bottle.
- 9. Only one child will be allowed in the bathroom at a time. We will be cleaning the bathrooms throughout the day.
- 10. All mats and equipment will be wiped down throughout the day.
- 11. Children will not be able to share "devices" during camp. They **can not** bring toys to camp to play with , or share with the other campers.
- 12. All children will need to bring their own lunch and snack with them each day, or you can order from Your Pie Pizza for \$8.

Signed	Date

Please fill this out in its entirety and email it to cherone@gymsouth.com or print it out and bring it with you on the first day of camp.