

Holiday Camp 2024-2025

Child's Name: _____ Child's Age: _____

I understand that I am not allowed to bring a sick child with a fever over 100.4 to Summer Camp.

Initials: _____ Date: _____

I understand that drop off is as early as 8:00 AM, and that pick-up is as late as 6:00PM. If he/she has a fever over 100.4 please keep him/her at home. If I am late picking up my child, **I will be charged \$1.00** (per child) every minute I am late. The clock in the lobby is used to determine time. Initials: _____ Date: _____

I understand that I must register online for camp. **If you are a walkin, the cost is \$5 extra.** The link is found on the homepage 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 past 12 months.

Initials: _____ Date: _____

I, _____ acknowledge that I have been informed that this program is not a licensed child care facility. I also understand this program is not required to be licensed by the Georgia Department of Early Care and Learning and this program is 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 Phone:	
Address:	City:	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 South:		
Family Doctor:	Dr's #:	
Medical Insurance Co:	Policy #:	
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 months.

___ It 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 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 child may have (food, medicine, insect bites, etc.)

ALLERGY

INSTRUCTIONS

If your child will be taking any medications please let the front desk staff know and place the medication in a container or sandwich bag containing the child's name and instructions for giving the medication.

Please list below any illnesses or conditions that we should know about

EMERGENCY 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 carrier is _____ and my policy number is _____. If you have any questions, please call me at _____ or _____. Thank 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 Consented 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 South 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 CHARGE** a late fee of \$1.00 (per child) every minute you are late picking up your child. The clock in the lobby 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. The water fountain will be available, but campers can bring a water bottle as well.
8. Only one child will be allowed in the bathroom at a time. We will be cleaning the bathrooms throughout the day.
9. 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.
10. 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.****