

December 2011 OPEN GYM Schedule

9:30-11:30 a.m. DROP-OFF for AGES 3-5 years

(Children younger than 3 years, but enrolled in our pre-gym classes may join us on a case by case basis)

December

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
11	12 (Last fall Mon. class)	13 OPEN GYM 9:30-11:30	14 (Last fall Wed. class)	15 (Last fall Thurs. class)	16 (Last fall Friday class)	17
18	19	20 Open GYM 9:30-11:30	21 Open GYM 9:30-11:30	22	24	24
25	26	27 Open GYM 9:30-11:30	28 Open GYM 9:30-11:30	29 Open GYM 9:30-11:30	30	31

Open Gym pricing: \$25 per child per day; (+ \$10 for each additional sibling in same family) PER day. No lunch or snack needed.

OPEN GYM FEES ARE NON-REFUNDABLE

WHAT (NOT) to WEAR :)

Please have your child wear knit leggings, sweatpants, etc. SHORT sleeves or ¾ sleeves are much preferred, also. Please NO belts, dresses, long shirts/tops, jeans or cords, as they are hard to climb in/unsafe. SLIP-ON shoes please (boots, Velcro, crocs, etc). Children go barefoot.

Payment due in advance, please! OPEN GYM FEES ARE NON-REFUNDABLE

If your child is currently registered @ CJG & all information is still current, we do NOT need another form. If your child is NOT enrolled@ CJG, please SKIP THIS SECTION & fill out the form on the next page.

Child's NAME: _____ Current CJG class IF enrolled _____

OPEN GYM DATES (please check dates):

Tues., 12/13/11 _____

Tues., 12/20/11 _____

Tues. 12/27/10 _____

Wed., 12/21/11 _____

Wed. 12/28/10 _____

Thurs. 12/29/11 _____

December 2011 OPEN GYM Registration

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may join us on a case- by- case basis)

Please email first to make sure there is availability. If so, please mail checks to:
CJG c/o 3008 Clarendon Rd. Charlotte, NC 28211-3229

Child/children's NAME(S) _____

Current age(s) _____ Birth date(s) _____

Parents' names _____

**EMAIL: _____ Address _____ zip _____

Mom's Cell: _____ Dad's cell: _____ Home phone: _____

OTHER person allowed to pick up your child/children: _____ cell _____

Carpooling with: _____ cell _____

Charlotte Jr. Gym, Inc. Permission and Release

I, the undersigned parent or guardian of (child/children's name) _____ give my approval for my child(ren) to participate in the activities of the pre-gymnastics program including classes, birthday parties, camps, or any involvement in Charlotte Jr. Gym, Inc. My child(ren) is/are physically able to participate, and in doing so, will in no way harm his/her/their health. I further assume all risks and hazards incidental to the conduct of the activities. I hereby release, absolve, and hold harmless Willow Rockecharlie, Charlotte Jr. Gym, Inc., her instructors, Charlie Markey Properties, its employees/volunteers from any and all injury, loss, or damage to us or the above child(ren) arising out of activities of the program. I understand I am assuming all risks inherent in gymnastics, whether known or unknown, and that by signing this document I am giving up my right to sue Charlotte Jr. Gym, Inc., its management and employees and the businesses/people otherwise named above. I voluntarily sign my name evidencing my acceptance of the above provisions. I grant permission for treatment deemed necessary for a condition arising during participation of these activities, including medical or surgical treatment recommended by a medical doctor. I understand every effort will be made to contact me prior to treatment. In conclusion, Willow Rockecharlie and her instructors reserve the right to refuse or terminate enrollment to a child with behavior issues. **OPEN GYM FEES ARE NON-REFUNDABLE**

Parent or Guardian SIGNATURE _____ Date _____

OPEN GYM DATES (please check dates):

(Please include check w/ this form)

Tues., 12/13/11 _____

Tues., 12/20/11 _____

Tues. 12/27/11 _____

Wed., 12/21/11 _____

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Thurs. 12/29/11 _____