

# Martin Luther King JR.

## Day Camp

Monday, January 16th

Off from school? Come and spend the day with Ricochets!



We are sure to have a blast with this exciting day full of activities including

- Games - Gymnastics - Arts and Crafts - Movies - Fitness - Open Gym - and More!!

For Boys and Girls ages 3 and Up (must be potty trained)

**10:00 am - 3:00 pm**

\*Please bring a bagged lunch

**Extended Care: 8:00 -10:00 am and 3:00 - 5:00 pm Cost: \$7 /hr**

Fresh fruit will be provided during AM extended care, and animal crackers and juice during PM extended care.

**\$55 for Members and \$65 for Non-members**

**Special Discount:** register two or more students in one family and receive **10%** discount off additional child(ren)

**\*\* REFER A FRIEND \*\***

If your **non-member** friend registers for our "MLK Day Camp," we will show our gratitude by giving you a \$5.00 credit, which can be used towards future payments and purchases. Referral must be documented on friends application.

(Not applicable for RGT merchandise)

Space is limited - 1st come, 1st serve basis

\* 50% credit will be given if cancelled by January 2nd \*

\*\* No credit will be given after January 2nd \*\*

Please complete information below and return, with payment, to the front desk, or mail to:

Ricochets 362 S. Warminster Rd. Hatboro, Pa 19040

**\*\*Reminder:** Please bring a bagged lunch.

M.L.K Day Camp: Student Name:	Age	Class level or Non-member	AM CARE (8-10AM)	PM CARE (3-5PM)	Disabilities or conditions requiring our attention?
			From: ___:___ to 10:00AM.	3:00 PM to: ___:___	
			From: ___:___ to 10:00AM.	3:00 PM to: ___:___	

**Non-Member Referral:** \_\_\_\_\_

**Emergency Contact Information (during program hours):**

\_\_\_\_\_ Name \_\_\_\_\_ Relation to student \_\_\_\_\_ Phone Number \_\_\_\_\_

\$ _____ program cost 1st student	( + \$ _____ ) additional student(s) (10% discount applied here)	+ \$ _____ extended care (# of hours per student x \$7.00)	= \$ _____ Total
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As the parent(s) or legal guardian(s) of the student(s) named above, I hereby consent to his/her participation in the programs offered by Ricochets Gymnastics, Inc. and to the use of all facilities at Ricochets Gymnastics, Inc. As a condition to participation in RICOCHETS programs, I hereby release and forever discharge Sarah Lang and Christopher Zimmerman and/or any employees, or any individual acting on behalf of RICOCHETS, and connected with this program in which I, or my child may participate, from any and all claims, demands, or losses of every kind and nature which may result to my child, myself, or my heirs, except where such losses or damages is the result of the intentional or reckless conduct of one of the organizations or individuals identified above. I recognize and acknowledge all risks involved in participation in the above program and assume all risks inherent in participation in the same. I am aware that individual and group publicity photos and videos are taken from time to time, and I hereby grant permission for my or my child(ren)'s likeness to be used in Ricochets Gymnastics publicity or advertising. I have read and fully understand this liability waiver, and agree to the club policies.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_