



Spring Fling

Wednesday, Thursday & Friday,
April 12th, 13th, & 14th



Want a day to yourself? Let the Ricochets' staff entertain the kids!

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 to 13 (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, or days, in one family and receive **10%** off add'l child(ren)/day(s).

**** REFER A FRIEND ****

If your **non-member** friend registers for our "Spring Fling 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 April 1st *

** No credit will be given after April 1st **

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.

| Spring Fling: Student Name: | Age | Class level or Non-member | AM CARE (8-10 AM) | PM CARE (3-5 PM) | Desired Date(s) (please check) | Disabilities or conditions requiring our attention? |
|--------------------------------|-----|------------------------------|--------------------------------|--------------------------|---|--|
| | | | From: ____:____ to 10:00AM. | 3:00 PM to: ____:____ | Wed. 3/23 _____ Thurs. 3/24 _____ Fri. 3/25 _____ | |
| | | | From: ____:____ to 10:00AM. | 3:00 PM to: ____:____ | Wed. 3/23 _____ Thurs. 3/24 _____ Fri. 3/25 _____ | |

Non-Member Referral: _____

Emergency Contact Information (during program hours):

Name: _____ Relation to student _____ Phone Number _____

| | | | | | |
|--------------|-----------------------------|---|-----------------------------------|---|----------|
| \$ _____ | (+ \$ _____) | + | \$ _____ | = | \$ _____ |
| program cost | additional student(s) | | extended care | | Total |
| 1st student | (10% discount applied here) | | (# of hours per student x \$7.00) | | |

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: _____