



Gymnastics Camps

Contact: Danielle Walker, walkerd@northshoreymca.org

Child's Name: _____ DOB ____/____/____

Address: _____ City: _____ Zip: _____

Phone: _____ Email Address: _____

Are you a new camper? Please tell us who referred you so we can send them a gift card!

Name: _____ Phone Number: _____ Email: _____

Membership must be current at time of registration in order to receive member rates!

Rising Stars Gymnastics Camp

Campers Age 4 to Entering Grade 2, co-ed
1 week sessions 9:00am to 1:00pm

Session & Dates	9am-1pm	2, 3 or 5 Day Option?
Session 1—6/25-6/29		
Session 2—7/2-7/6		
Session 3—7/9-7/13		
Session 4—7/16-7/20		
Session 5—7/23-7/27		

Session & Dates	9am-1pm	2, 3 or 5 Day Option?
Session 6—7/30-8/3		
Session 7—8/6-8/10		
Session 8—8/13-8/17		
Session 9—8/20-8/24		
Session 10—8/27-8/31		

Fees per session:

2 day option (Tues. and Thurs. Only)

3 day option (Mon, Wed, Fri Only)

5 day option (Monday-Friday)

Member-\$105

Member-\$135

Member-\$195

Community-\$155

Community-\$185

Community-\$245

**Early Drop and Extended Day are available.
Please see separate registration form
for more information and to register.**

**Please turn over to register for
Shooting Stars Gymnastics Camp!**

Shooting Stars Gymnastics Camp

Campers Entering Grade K-Grade 8, co-ed
1 week sessions 9:00am to 3:00pm

Session & Dates	9am-3pm
Session 1—6/25-6/29	
Session 2—7/2-7/6	
Session 3—7/9-7/13	
Session 4—7/16-7/20	
Session 5—7/23-7/27	

Session & Dates	9am-3pm
Session 6—7/30-8/3	
Session 7—8/6-8/10	
Session 8—8/13-8/17	
Session 9—8/20-8/24	
Session 10—8/27-8/31	

Fees per session:

Member-\$280 Community-\$330

**Early Drop and Extended Day are available.
Please see separate registration form
for more information and to register.**

Financial Assistance Information

Nan Camp _____
School Pay _____
Voucher _____
Rotary _____
Access _____
Other _____

All applicants with financial assistance must include a letter of verifying amount and status at time of registration.

Would you like to make a donation to "Y for All" to help a child in need attend summer camp?

____ Yes! Please charge my card for the amount of
\$20___ \$50___ Other \$___
____ Yes! I have enclosed a check in the amount of
\$20___ \$50___ Other \$___

THANK YOU!

Payment: Complete Appropriate Section

You must register, have all completed forms, and be paid in full by 12pm the Friday before the first day of the camp session.

CASH _____ **Amount Paid:** _____ **CHECK** _____ **Check #:** _____ **Amount:** _____

Credit Card _____ **MASTERCARD** _____ **VISA** _____ **AMEX** _____ **DISCOVER** _____

Name on Card: _____

Credit Card #: _____ CVV #: _____ Exp. Date: ____/____

Signature: _____

Amount to Charge: _____

**A \$50 per session non-refundable deposit must be submitted with all applications.
Change of Camp Policy: All parents are allowed to change camps one time free of charge. All other changes will incur a \$15 fee.**