

“THE BLUEWATER GYMNASTICS CLUB” – SCHEDULE 2011/ 2012

PRESCHOOL PROGRAMS	Upstairs Gym ^ Downstairs Gym v	Tuesday	Wednesday	Thursday	Friday	Saturday
		Gym Tots (18 months to 5 yrs) 1Hr	10:30 – 11:30 v	10:30-11:30 v	10:30 – 11:30 v	
Kindergym (3 years to 5 years) 1Hr	9:30 – 10:30 v 10:30 – 11:30 v 12:00 – 1:00 v 6:00 – 7:00 ^	9:30 – 10:30 v 10:30 – 11:30 v 12:00 – 1:00 v 6:00 – 7:00 ^	9:30 – 10:30 v	9:30 – 10:30 v	6:00 – 7:00 ^	11:00 – 12:00 v
Boys and Girls Together				6:00 – 7:00 ^	6:00 – 7:00 ^	
Advanced Kindergym (3 years to 5 years) 2 Hrs (By Invitation Only)		12:00 – 2:00 v	9:30 – 11:30 v			11:30-1:30 v
RECREATIONAL PROGRAMS						
Recreational Boys (6 years to 10 years) 1.5 Hrs (boys group separate from girls)	6:00 – 7:30 v			6:00 – 7:30 v		12:00 – 1:30 v
Girls Gymnastics (6 years to 8 years) 1.5 Hrs	6:00 – 7:30 v			6:00 – 7:30 v		12:00-1:30 v
Girls Gymnastics (9 years to 15 years) 1.5 Hrs	7:30 – 9:00 v			7:30 – 9:00 v		12:00-1:30 v
Girls Gymnastics (6 years to 15 years) 2 Hrs		6:00 - 8:00 v				1:30 – 3:30 v
Advanced Junior Recreational (6 years-9 years) 2 Hrs		6:00 - 8:00 v	6:00 - 8:00 v			1:30 – 3:30 v
Advanced Senior Recreational Girls Gymnastics (9 years to 15 years) 3 Hrs		6:00 - 9:00 v	6:00 - 9:00 v			1:30 – 4:30 v
ADULT Monday 8:30-9:30						
TRAMPOLINE PROGRAMS						
Boys and Girls (6 years and up) 1 Hr	7:30-8:30 v			7:30 - 8:30 v		

Gymtots- (1 Hour) Children from the ages of 18 months to 5 years old can experience gymnastics along side their parent. This program provides an assortment of musical warm-up, stretching and progressive skill development circuits on all apparatus in the gym.

Kindergym- (1 Hour) This program is designed for children ages 3-5 years of age. The kindergym program is a structured gymnastics class where children progress through our kindergym levels. Skills are learned on all the apparatus in the gym. *MUST BE POTTY TRAINED.

Advanced Kindergym- (2 Hours) Children are chosen to participate in this program by coach’s recommendation only.

Recreation- (1.5 hours or 2 Hours) This program is designed for children ages 6-15 years of age. Children progress through the CanGym program. There are fourteen levels in this system. Circuits are set-up throughout the gym and children learn skills specific to their level.

Junior Advanced Recreation- (2 Hours) Ages 6-9 years

This program emphasizes form and technique, physical conditioning and progressive skill development. The CanGym level system will be used in addition to the program.

Senior Advanced Recreation- (3 Hours) This program is designed for the more advanced gymnast. Gymnasts must be at minimum, working on Turquoise Level or Equivalency in skills.

Adult (1 Hour) This program provides an assortment of supervised warm-up, stretching and skill development.

**BLUEWATER
GYMNASTICS
CLUB**

SARNIA INC.

2011 / 2012

**RECREATIONAL
PROGRAMS
For ages
(18 months and up)**



N.C.C.P. CERTIFIED INSTRUCTORS

Located at:

**1540 Lottie Neely Park Rd.
(Veteran’s Park)
Sarnia, ON N7T 7H4**

519-542-3062

519-542-0174 (Fax)

bluwatergymnastics@bellnet.ca

www.bluwatergymnastics.com

- SESSION DATES**
- #1 Sept. 6/11 to Nov. 12/11
 - (10 week sessions) #2 Nov. 15/11 to Feb. 4/12 (2 weeks Christmas Break-no classes)
 - #3 Feb. 7/12 to Apr. 21/12 (1 week March Break-no classes)
 - (Classes will be held on Good Friday)
 - #4 Apr. 24/12 to June 30/12

REGISTRATION FEES

	1 HOUR	1.5 HOUR	2 HOUR	3 HOUR
10 WEEKS	100.00	\$141.50	\$187.00	\$242.00

The *ONTARIO GYMNASTICS FEDERATION (GO) requires all gymnasts to pay a once-yearly, non-refundable registration fee (includes insurance). This **\$30.00** fee is paid with your first session payment and a portion is submitted to Gymnastics Ontario. This fee will expire on Jun. 30th, 2012.

BUILDING LEVY: There is a one time new building levy of **\$50.00 per FAMILY** and will go toward the capital cost of the building. This is a one time fee.

FUNDRAISING RAFFLE: There will be a fee of **\$20.00 per family per session.**

MONTHLY PAYMENT PLAN

	COST	MONTHLY	# OF CHEQUES
1 HOUR CLASS			
20 Weeks	\$200.00	\$40.00	5
30 Weeks	\$300.00	\$37.50	8
40 Weeks	\$400.00	\$40.00	10
1.5 HOUR CLASS			
20 Weeks	\$283.00	\$56.60	5
30 Weeks	\$424.50	\$53.06	8
40 Weeks	\$566.00	\$56.60	10
2 HOUR CLASS			
20 Weeks	\$374.00	\$74.80	5
30 Weeks	\$561.00	\$70.12	8
40 Weeks	\$748.00	\$74.80	10
3 HOUR CLASS			
20 Weeks	\$484.00	\$96.80	5
30 Weeks	\$726.00	\$90.75	8
40 Weeks	\$968.00	\$96.80	10

* Add \$30.00 GO/Reg Fee to 1st cheque. Please date cheques for the first of the month, changing the year to 2012 in Jan. Please submit building levy cheques separate.

Refund Policy: Refunds will be given for illness only. A doctor's certificate must be presented.

Phone registrations will not be accepted unless accompanied by credit card payment.

REGISTRATION FORM

LASTNAME _____ FIRSTNAME _____ SEX (CIRCLE) M F

DATE OF BIRTH (DD/MM/YY) _____ HOME PHONE NUMBER _____

ADDRESS _____

CITY _____ POSTAL CODE _____ EMAIL _____

PARENT or GUARDIAN'S NAME _____ EMERGENCY NUMBER or CELL PHONE # _____

HEALTH CARD NUMBER _____

DOES THE PARTICIPANT HAVE ANY PHYSICAL, MENTAL OR MEDICAL CONDITIONS, WHICH FOR SAFETY REASONS, SHOULD BE DISCLOSED? YES ___ NO ___ (If Yes, please contact office.)

CLASS DAY AND TIME - 1ST CHOICE: _____ CLASS DAY AND TIME - 2ND CHOICE: _____

NOTE: You will only be contacted if your 1st choice is not available.

REGISTRATION FOR: Session #1 Session #2 Session #3 Session #4
(Monthly payments available if you sign up for a minimum of 2 sessions. (20 weeks)

SESSION COST: \$ _____ + **\$30.00 *GO Fee** + **\$50.00 Bldg Levy** + **\$20.00 FUNDRAISING FEE** = \$ _____ **Total**

Payment Option: ___ FULL PAYMENT OR ___ MONTHLY + ANNUAL FEE + BUILDING LEVY
Payment Method: ___ CASH ___ CHEQUE ___ VISA ___ MASTERCARD

CARD NUMBER _____ EXPIRY DATE _____

NAME ON CARD: _____ SIGNATURE: _____

FAMILY DISCOUNT: 2nd Child 10% off ___ 3rd Child \$40.00 per session ___ See office for more details

By signing this form, I acknowledge that I am aware that there are risks associated with gymnastics. I warrant that the participant named on this form is physically fit to participate in gymnastics. I declare that I have accurately disclosed all information regarding physical, mental or medical conditions affecting the named participant and acknowledge that this information may be used for the Club's/GO's use in the delivery of a gymnastic program. I acknowledge that there is potential risk for injury involved in training and competing in any sport. I understand that the OGF has tried to create a safe and controlled environment for participation and that the Club has established rules for participation on and about the gymnastic area that must be followed by the participant. I understand that failure to comply with any of the policies and rules of the Club/OGF may result in the suspension or termination of membership. I waive the rights of the participant to damages or other costs in the event injury is caused due to participation in gymnastics or other involvement with the OGF.

Signature _____ Date _____