

# NorthStar Gymnastics Inc.



–Presents–

## Gymnastics Jam Day Camp!

**Wednesday, June 26, 2019  
2:30 - 6:30 p.m.**



### WHO'S THE CAMP FOR?

6 YEARS OLD & UP

ALL LEVELS

**\*\* LIMITED TO 60 GYMNASTS \*\***



**REGISTRATION DEADLINE: FRIDAY, JUNE 21, 2019**

### CAMP TUITION

**\$40.00**

**DUE WITH YOUR REGISTRATION**

**CURRENT NORTHSTAR MEMBERS. IF YOU REFER A NON NORTHSTAR FRIEND AND THEY REGISTER FOR THE CAMP YOU GET 10% OFF YOUR REGISTRATION. LIMIT ONE PER REGISTRATION.**

### WHAT'S INCLUDED

**SNACK LUNCH. ALL PRINTED MATERIALS GIFT.**

### HIGHLIGHTS OF THE CAMP

**\*ALL EVENTS WILL BE COVERED: VAULT, BARS, BEAM, FLOOR, & TRAMPOLINE**

**\*INTRODUCTION TO NEW SKILLS**

**\*THE FINE TUNING OF CURRENT SKILLS**

**\*THE FUNDAMENTALS THAT MAKE YOU ADVANCE FASTER**

**\*THINGS TO DO AT HOME THAT WILL HELP YOU ADVANCE FASTER**

# Northstar Gymnastics Inc. Camp Evaluation Form

Student: \_\_\_\_\_

Parent / Guardian: \_\_\_\_\_

Phone Number: \_\_\_\_\_

If you need help filling out this form let us know. We will be happy to help.

**Check the skills they can do.**

## Vault

- \_\_\_ From a run. Handstand flat back elevated mats
- \_\_\_ Handspring over the table vault

## Bars

- \_\_\_ Pull over
- \_\_\_ Back hip circle
- \_\_\_ Kip
- \_\_\_ Fly away dismount

## Beam

- \_\_\_ Handstand
- \_\_\_ Cartwheel
- \_\_\_ Back walkover
- \_\_\_ Back handspring

## Floor

- \_\_\_ Cartwheel
- \_\_\_ Bridge kickover
- \_\_\_ Back walkover
- \_\_\_ Back handspring
- \_\_\_ Round off back handspring
- \_\_\_ Round off back handspring  
back tuck

# Northstar Gymnastics Inc. Camp Evaluation Form

**\*\*\* This form is to be filled out if you are not a member at Northstar. If your gymnast is more advanced, please fill out the other evaluation form. \*\*\***

Northstar Gymnastics summer camp is open to every one of any gymnastics level. As a gymnast that is not currently enrolled in one of our programs we had a few quick questions to make sure your daughter is put in the proper group and working on the skills they need. We have a quick survey to help us determine where your child should be:

Has your daughter / son ever been enrolled in a gymnastics class?      YES      NO

- If YES, where and for how long? \_\_\_\_\_

Can your daughter / son do a Bridge with her head off the ground?      YES      NO

Can your daughter / son do a Round off?      YES      NO

Can your daughter / son do a Bridge Kickover?      YES      NO

Has your daughter / son been exposed to a Round off Back Handspring?      YES      NO

Can your daughter / son do a Pullover on Bars?      YES      NO

Has your daughter / son been exposed to a handstand on Beam?      YES      NO

\*If you don't understand the skills we are asking about, contact us or arrive a few minutes early to camp. We can help you.

**NorthStar Gymnastics Inc.**  
**Non-Member Gymnastics Jam Day Camp Form**  
Camp Date: Wednesday, June 26, 2019

To participate in this camp please fill out this form in its entirety. REGISTRATION CANNOT BE ACCEPTED IF SIGNATURES ARE NOT PROVIDED AND/OR ALTERATIONS HAVE BEEN MADE TO THE WORDING OF THIS DOCUMENT.

Student's Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Parent / Legal Guardian Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Are there any medical conditions / food allergies of which we should know of?

\_\_\_\_\_

How did you learn about NorthStar Gymnastics Inc.? \_\_\_\_\_

**Your Payment Must Be Included With This Form**

**Form of Payment:** Cash Check Visa/MC Card # \_\_\_\_\_ exp.: \_\_\_\_\_

Signature: \_\_\_\_\_

**\*\*\* If your gymnast has had gymnastics experience please fill out the \*\*\*  
Skill Evaluation Form**

\*\*\*\*\*

**Acknowledgment of Risk and Waiver of Liability**

As parent / legal guardian of \_\_\_\_\_, who is enrolled in the gymnastic program at NorthStar Gymnastics Inc., I understand that any activity involving height or motion, which includes gymnastics, involves danger that can result in personal injury. On behalf of our child, I accept that these dangers exist and are inherent in the sport and agree to defend, indemnify, and hold harmless NorthStar Gymnastics Inc., its employees, its owners, and agents from and against any liability arising from injury to our child while said child is a participant at NorthStar Gymnastics Inc..

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Permission to Treat**

I hereby give my permission to trained medical professionals to administer emergency medical treatment to my child should sickness or accident occur in my absence.

Signature: \_\_\_\_\_ Date \_\_\_\_\_