



For Office Use Only
Registration Email Sent: _____

Car Tag Mailed: _____

Exxel Gymnastics and Climbing Summer Camp 2022 REGISTRATION FORM

CAMPER INFORMATION						
Camper 1 Last Name:	First:	Middle:	Allergies/Medical Conditions:			
Age:	DOB:	Sex:				
Camper 2 Last Name:	First:	Middle:	Allergies/Medical Conditions:			
Age:	DOB:	Sex:				
Camper 3 Last Name:	First:	Middle:	Allergies/Medical Conditions:			
Age:	DOB:	Sex:				
Address:			Email:			
			* You will receive confirmation via email			
Parent(s) Name:			Parent(s) Name:			
Home #:			Home #:			
Cell Phone#:			Cell Phone #:			
Work Phone#:			Work Phone#:			
(Opt In Text? Y/N)			(Opt In Text? Y/N)			
Referred by (please check one box):	<input type="checkbox"/> Family/Friend	<input type="checkbox"/> Ad	<input type="checkbox"/> Close to home/work	<input type="checkbox"/> Website	<input type="checkbox"/> Other	
Primary way you would like to be contacted:		Home: <input type="checkbox"/>	Cell: <input type="checkbox"/>	Work: <input type="checkbox"/>	Email: <input type="checkbox"/>	
EMERGENCY INFO						
Emergency Contact Name:			Relationship to Camper:	Home phone:	Work or Cell phone:	
Emergency Contact Name:			Relationship to Camper:	Home phone:	Work or Cell phone:	

Please check off the weeks that your campers will be attending below. *Please note the gym is closed on Monday, July 4th.*

Sessions:	6/20	6/27	7/4 No Camp Monday	7/11	7/18	7/25	8/1	8/8	8/15	8/22
Gymnastics Pre School Camp (Ages 3y-5y)										
*Pre School please circle which day(s) you will attend during each week:	MTW THF	MTW THF	TW THF	MTW THF	MTW THF	MTW THF	MTW THF	MTW THF	MTW THF	MTW THF
Gymnastics Camp (ages 5y+)										
Climbing/Sports Camp (ages 5y+)										
AM Extended Day (8-9)										
PM Extended Day (3-5)										

Medical Information: Please specify camper and list any pertinent allergies or medical conditions.

CAMPER 1 _____

Allergies _____

Does your child have an Epi-pen for the above allergy? ___Yes ___No

Will your child need to take medications or use an Epi-pen while at camp? ___Yes ___No

Additional allergy or health information:

CAMPER 2

Allergies _____

Does your child have an Epi-pen for the above allergy? Yes No

Will your child need to take medications or use an Epi-pen while at camp? Yes No

Additional allergy or health information:

CAMPER 3

Allergies _____

Does your child have an Epi-pen for the above allergy? Yes No

Will your child need to take medications or use an Epi-pen while at camp? Yes No

Additional allergy or health information:

NOTE: HEALTH & MEDICAL INFORMATION

Massachusetts State Law requires each camper to have an updated physical, as well as a current record of immunization, by his/her physician. Exxcel Camp requires each camper to have an **updated physical dated within 12 months of arrival to camp.** **We must have completed forms in our files before your child can begin camp.**

All camp forms are due to the office by June 1, 2022

Please note that our camp has CPR and First Aid trained staff available. All coaching staff has been Safety Certified to teach gymnastics.

Waiver of Liability

As the parents, or legal guardians, of _____ we hereby give permission for our child(ren) to participate in programs at Exxcel Gymnastics, LLC. We recognize that gymnastics and indoor/outdoor climbing are sports that involve height and rotation of the body, and there are inherent risks involved. On behalf of our children and on our own behalf, we agree to waive all claims against Exxcel Gymnastics, LLC and its owners, staff, and instructors, for any liability, loss, cost, damage, medical expense, long-term care or emotional distress arising out of any personal injury, including total disability, paralysis and death, which may occur to any of our children while on the premises of or under the instruction, supervision, or control of Exxcel Gymnastics, LLC. We hereby testify to our child's sound health of mind and body and we authorize Exxcel Gymnastics, LLC to seek medical attention at the nearest medical facility in case of emergency.

SUMMER CAMP POLICIES

- Payment, health forms, and registration information must be completed and returned to camp upon enrollment.
- A 10% sibling discount will apply to the second child enrolled and a 20% sibling discount will apply to the third child enrolled.
- **Refund policy: A full refund will be issued if cancellation is made before June 1, 2022. After June 1, 2022 no refunds or credits will be issued. There will be no refunds or credits given if a child comes to camp without the required health form and is restricted from participation. There will be no refunds or credits if a camper fails to attend, withdraws, experiences incomplete attendance, or is dismissed.**
- Exxcel reserves the right to cancel the enrollment of a child who becomes uncontrollable or violates safety rules; no credits or refunds given.
- *There is a \$25.00 late fee charged if a child is picked up after 3:15PM (or 15 minutes after their enrolled times).*
- A pick up authorization is required if someone other than the parent is picking up your child.
- We reserve the right to combine classes due to absenteeism, low enrollment, coaching changes, or any other extenuating circumstances.
- Exxcel is not responsible for lost or stolen items brought into the facility. Please leave all valuable items at home.

PARENTAL PERMISSIONS

By signing below, you give permission:

- For Exxcel Gymnastics, LLC to make, have, use, publish, and reproduce photographs, slides, motion pictures, and/or videotapes of your camper for its records and public relations programs. Pictures may be displayed in our gym, printed in our advertisements or on the internet. Note: You may refuse any and all use of photos and tapes related to your child, provided written notice is given to the Camp Director prior to the start of camp.
- For your child(ren) to participate in all camp programs, activities, and events, including out-of-camp trips by camp or commercial transportation, understanding that camp leadership and supervision will be provided. Transportation for field trips will be provided by Eastern Bus Co.
- For an Exxcel camp staff member to apply sunscreen to your child(ren), if needed. A written notice must be given to the office if permission for us to apply sunscreen is denied. Note: It is our expectation that your child(ren) will arrive at camp with sunscreen already applied.

We have read and understand all the above and agree to the above terms including the Waiver of Liability.

Parent/Stepparent/Guardian
Signature _____

Date _____



88 Wells Ave., Newton, MA 02459 (617) 244-3300 office@exxcels.net

Assumption of the Risk and Waiver of Liability Supplement Relating to COVID

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Exxcels Gymnastics LLC has put in place preventative measures to reduce the spread of COVID-19; however, Exxcels Gymnastics LLC cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending Exxcels Gymnastics LLC could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I _____ acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Exxcels Gymnastics LLC and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at Exxcels Gymnastics LLC may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Exxcels Gymnastics LLC employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at Exxcels Gymnastics LLC or participation in Exxcels Gymnastics LLC programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless Exxcels Gymnastics LLC, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Exxcels Gymnastics LLC, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Exxcels Gymnastics LLC program.

I understand that this is a supplement to the 2021-2022 Release Form.

Signature of Parent/Guardian _____ Date: _____

Print Name of Parent/Guardian _____

Name of Student(s) _____