PA Day Camp Registration
2026 - 2027

Camp Hours and Rates

	Times	Price
Full Day	9am - 4pm	$65
Half Day - AM	9am - 12pm	$50
Half Day - PM	1pm - 4pm	$50
Before Care	8am - 9am	$20
After Care	4:00pm - 6:00pm	$20/hour

	Dates	Full or Half Day	BC	AC	Subtotal	Total
1	Friday, November 20th 2026	Full - AM - PM				
2	Friday, January 29th 2027	Full - AM - PM				
3	Friday, April 30th 2027	Full - AM - PM				
4	Friday, June 4th 2027	Full - AM - PM				
5	Wednesday, June 30th 2027	Full - AM - PM				

Class Fees Do Not Include HST. No Refunds After The First Class.
Pictuires & Videos May Be Used for Promotional Use.

Card #	**Exp.**	**Cvv**

401 Dissette Street, Unit 8 & 9, Bradford, ON, L3Z 3G9
Donna@genesisgymnastics.ca
905 775 4961

Participant

Last Name:	**First Name:**	
Date of Birth:	Age:	Sex: M or F
Special Needs:		
Medications/Allergies:		

Parent/Guardian and Emergency Contact Information:

Last Name:		**First Name:**	
Address:	City:	Apt.	PosalCode:
Cell #:	Email Address:		
Emergency Contact Name:		Phone #:	

READ BEFORE SIGNING

WARRANTY AND CONSENT OF PARENT/GUARDIAN

ASSUMPTION OF RISK RELEASE AND WAIVER OF LIABILITY INDEMNITY AGREEMENT

IN CONSIDERATION of allowing my minor child/ward to participate in the programme, related events and activities of the _____.
(Class Name Here)

I **WARRANT TO YOU THAT: 1**. I am a parent/guardian having full legal responsibility for decisions regarding my minor child/ward, and **2**. I am familiar with the risk of serious injury and death which any participant in this programme must assume, and **3**. I believe that my minor child/ward is physically, emotionally and mentally able to participate in this programme, and that his/her equipment is mechanically fit for his/ her use in this programme, and **4**. I understand, and will instruct my minor child/ward, that all applicable rules for participation must be followed and that at all times the sole responsibility for personal safety remains with my minor child/ward, and **5**. I will immediately remove my minor child/ward from participation, and notify the nearest official, if at any time I sense or observe any unusual hazard or unsafe condition or if I feel that my minor child/ward has experienced any deterioration in his/her physical, emotional or mental fitness for continued participation in the programme.

I UNDERSTAND AND AGREE, ON BEHALF OF MY MINOR CHILD/WARD, MYSELF, MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN, THAT MY EXECUTION OF THIS DOCUMENT CONSTITUTES: **1**. an unqualified ASSUMPTION OF ALL RISKS associated with participation in this programme by my minor child/ward even if arising from negligence, or gross negligence, including any compounding or aggravation of injuries caused by negligent rescue operations or procedures, of the programme organizer and any persons associated therewith or participating therein, and **2**. a FULL AND FINAL RELEASE AND WAIVER OF LIABILITY of the programme organizer and all persons and organizations associated with it and the programme including, without limiting the generality of the foregoing, its officers, directors, officials, agents and/or employees, other participants, sponsors, advertisers, owners and/ or lessors of the premises used to conduct the programme, sanctioning bodies, medical or rescue personnel (the RELEASEES), of and from with the respect to all injury, disability, death or loss or damage to person or property whether arising from the negligence, or negligent rescue of or by the foregoing or otherwise, and **3**. an UNDERSTANDING NOT TO SUE the RELEASEES for any loss, injury, costs or damages of any form or type, howsoever caused or arising, and whether directly or indirectly from the participation of my minor child/ward in the programme, and **4**. an AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the RELEASEES, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to any claim made against them or any one of them whether the claim is based on the negligence or the gross negligence of the RELEASEES or otherwise.

I HAVE READ THIS DOCUMENT THOROUGHLY. I UNDERSTAND THAT THE RELEASEES ARE RELYING UPON MY WARRANTIES, ASSUMPTIONS, WAIVER AND RELEASE, UNDERTAKINGS AND AGREEMENTS WHEN ACCEPTING MY MINOR CHILD'S/WARD'S PARTICIPATION IN THIS PROGRAMME. I UNDERSTAND THAT BY SIGNING THIS DOCUMENT I GIVE UP SUBSTANTIAL LEGAL RIGHTS I AND/ OR MY MINOR CHILD/WARD WOULD OTHERWISE HAVE. I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

_____ _____

SIGNATURE OF PARENT/GUARDIAN Printed name of parent/guardian

_____ _____

SIGNATURE OF WITNESS Printed name of witness

_____ _____

DATE AGE OF MINOR