



Home School Parents

"PGA Home School Gymnastics"

Phoenix Gymnastics & Dance Academy is now offering a gymnastics program for home school students.

We have had several requests for a morning gymnastics program for home school students. However, our standard class format has not always worked well for home school parents and their schedules, so we believe we have found an affordable, and practical solution for those who want to have their kids involved in a morning gymnastics program.

WHERE: **Phoenix Gymnastics & Dance Academy**
1926 W. Monona Dr.
Phoenix, AZ 85027

WHEN: **Every Thursday**

TIME: **10:30 am - 12:00pm** (Subject to change...
call in advance)

COST: **\$42.00 per 6 Week Session**
(comes to \$7 per class)

AGE: **4yrs old and up**

HOW TO PARTICIPATE:

- Complete our registration form
- Must call and sign up for the 6 week session that you would like to participate in:
- (cash, credit or debit card)

Instructors: Missy Dunn (Director)
Nikki Estes

Each week we will divide the group into older and younger kids. Instructor will take the their group to an event and periodically rotate events. Instructors will set up stations at each where the kids can work on various skills at that event and the instructor will help or spot as needed.

Students will be given a set of goals or skills to work on based on their current skill level. When the current skills have been mastered, then a new level of skills will be given to that student to accomplish.

Call to reserve your spot: 623-582-5293

Fax: 623-516-0567

email: office@phoenixgymnasticsacademy.com

Website: www.phoenixgymnasticsacademy.com



Program Benefits

- Morning Hours
- All children in the family can attend at the same time
- Drastically reduced cost per family.
- Same Great PGA Staff as the evening class





REGISTRATION FORM

Mother _____ Father _____

Address _____ Home Phone (____)____ - _____

City _____ Zip _____ Mom's Cell (____)____ - _____

E-Mail: _____ Dad's Cell (____)____ - _____

Mom's Wk (____)____ - _____ Dad's Wk (____)____ - _____

Student's Name (male/female) _____ Age ____ Birthdate ____/____/____

Student's Name (male/female) _____ Age ____ Birthdate ____/____/____

Student's Name (male/female) _____ Age ____ Birthdate ____/____/____

Student's Name (male/female) _____ Age ____ Birthdate ____/____/____

Acknowledgment of Risk and Release

As parent or legal guardians of the above named persons, I hereby give my consent to participate in the programs of Phoenix Gymnastics and Dance Academy. I understand that any activity involving height, motion and rotation involve certain inherent risks including paralysis or death. I understand that it is the express intent of the Phoenix Gymnastics and Dance Academy to provide for the safety and protection of my child and, in consideration for allowing my child to use these facilities, I hereby forever waive and release Phoenix Gymnastics Academy Inc, it's officers, employees, teachers and coaches, from all liability for any and all damages and injuries suffered by my child while under the instruction, supervision, or control of Phoenix Gymnastics Academy, Inc.

I confirm that the above named persons are in good health and have no known physical impairments that would cause harm to the above named persons by participation in this program. I also agree to individually provide for the possible future medical expenses which may be incurred by my child while training at, or performing for Phoenix Gymnastics & Dance Academy.

Parent / Guardian Signature _____ Date ____/____/____

Permission to Treat (Optional)

In the event of my absence, I hereby give my permission to trained medical professionals to administer emergency medical treatment to my child should sickness or accident occur.

Parent or Guardian Signature _____ Date ____/____/____

Emergency Contacts

In an emergency when parent or guardian cannot be reached please call:

Name _____ Phone (____)____ - _____

Insurance Co. _____ Policy # _____

Any Medical Condition to be aware of: _____

Students School or Home School Group _____

Previous experience(y/n) ____ Where _____ How Long _____

How Did You Learn About Us? yAnother Customer yWeb Site yMailer yBirthday Party yYellow Pages

y Other _____