

SUMMER CAMPS



TUMBLE & ART



\$198/week

9AM – 1PM Monday – Friday

Ages 5-8 1/2

June: 13-17 **July:** 18-22 **August:** 1-5, 8-12

Ages 9-13

June: 27-July 1

Camp Activities

- Gymnastics instruction with USAG safety certified instructors
- Trampoline, spring floors, tumbling pit, rings and more
- Obstacle courses & gym games
- Art instruction and activities
- Drawing, painting, mosaics, crafts and more!
- Snack time, lunch and video
- Camper Attire: T-shirt or leotard and athletic shorts. Long hair should be tied back. No jewelry please.

Camper should bring a snack, water bottle and bag lunch each day.

Art Camps

Preschool Art Camp \$108 Ages 3-5 1/2

9-11AM June 13-17

Intro to Pottery Art Camp \$118

Ages 5-8 1/2

9-11 AM Aug 8-12

Explore the world of Pottery Art Camp

\$128

Ages 9-Adult 9-11:30 AM July 25-29

Jr. Soccer Camp

Ages 3-5 1/2

Hours: 9 – 11AM

\$98 June 20-23

Monday-Thursday



Designed to teach fundamental soccer skills

Indoor and air-conditioned

Small camper / coach ratio

Includes gymnastics games and snack

Camper wear tennis shoes. Please no cleats.



Pre School Gymnastics

Ages 3–5 1/2 \$98 11:15AM-1:15PM M-TH

June: 13-16 **July:** 18-21 **August:** 1-4

27-30 8-11

9-11 AM M-TH July: 11-14

- Obstacle Courses & Trampoline
- Games & Daily snack
- Introduction to conditioning, flexibility exercises and all four gymnastics events
- Air-conditioned facility with spring floors and foam pit
 - Small camper / coach ratio



PEE WEE Cheerleading

Ages 5-8 1/2 Hours: 11:15-1:15

July 11-15 \$108

- *Stretching, tumbling & cheer activities*
- *Learn and present a routine*
- *Dance & conditioning*
- *Gym Games and Fun!*

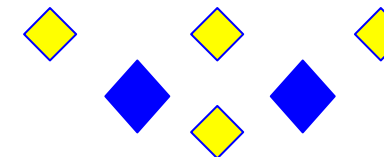
Princess Barbie Ballet

Cost: \$108 Ages: 5-8 1/2 Hours: 11:15-1:15

July 25-29 Monday-Friday



- Ballet instruction
- Choreography
- Princess & Barbie Story Time
- Princess & Barbie Craft
- Camper Attire: T-shirt and athletic shorts or leotard and tights.



Cheer Tumbling Camp

Ages 9-13 \$118/week

Monday-Friday 9AM- 11AM June 20th-24th

Monday- Friday 9AM-11AM July 25th-29th

Professional Gymnastics instruction on Spring floor and trampolines.

Work on flexibility, strength, and tumbling skills



Camper: Name _____

Address: _____ City _____

Zip _____

Date of Birth _____ Age _____ Sex _____

Email _____

PARENT/GUARDIAN INFORMATION:

Name _____

Phone (Home) _____

(Cell/Work) _____

Emergency Contact:

Name/Phone _____

Physician/Allergies/Medical/Conditions _____

Insurance _____

Policy # _____

Payment is non refundable and due with registration.

Check # _____ Amount \$ _____

Visa MC Discover # _____

Exp Date _____

State of North Carolina Union County - Release Agreement and Assumption of Risk IN CONSIDERATION of the covenants herein contained and agreement with Southeastern Gymnastics, its officers, agents and employees, For My Child/Children My Ward

_____ (Insert Full Name(s))to receive instruction in gymnastics and all activities incidental thereto, or to engage in gymnastics at the Southeastern Gymnastics, I do hereby release and discharge Southeastern Gymnastics, its officers, agents and employees from all claims, demands, actions, judgments and executions which I, my child or ward or our heirs, executors, administrators or assigns as applicable, may have or claim to have, against Southeastern Gymnastics, its agents or employees, for all personal injuries, known or unknown, and injuries to property, real or personal, caused by or arising out of the above-described activities. I assume for my ward or child, or I if applicable, all risks associated with those activities. I certify that I (or my child or ward if applicable) have no medical conditions that would be aggravated by or make it dangerous for me to participate in the above activities. I agree to abide by the posted rules and regulations of Southeastern Gymnastics and to obey the instructions of the staff. I understand there are risks associated with the sport of gymnastics that can cause harm, injury or death. I have read this RELEASE and understand all of its terms. I execute it voluntarily and with full knowledge of its significance. I here by authorize any emergency medical treatment for my child by physician, health service or hospital.

Parent Signature:

Date:

Weddington Activity Center
13601 Providence Road
Weddington, NC 28104
www.weddingtonactivitycenter.com