



SUMMER GYMNASTICS & NINJA CAMP/ CLASSES 2021

MONDAY	TUESDAY	WEDNESDAY	THURSDAY
	TADPOLES 9-9:45 14-36 mos	TADPOLES 9-9:45 14-36 mos	
	LEAPFROGS 9-9:45	LEAPFROGS 9-9:45	
CAMP 10-2	CAMP 10-2	CAMP 10-2	CAMP 10-2
Peewee Ninja 2:30-3:20 3-5yrs	Gymnastics 2:30-3:30 4-6yrs	Gymnastics 2:30-3:30 4-6yrs	
Gymnastics 5-8yrs 2:30-3:30	Gymnastics 7-9yrs 2:30-3:30	Flip & Tumble 9+yrs	
Gymnastics 9+yrs 2:30-3:30	Ninja 8-12yrs 2:30-3:30	Gymnastics 5-8yrs 2:30-3:30	
	Ninja 5-8yrs 2:30-3:30	Ninja 5-8yrs 2:30-3:30	

CLASSES run 6 weeks (7/5-8/19, **closed the week of 7/26)

- 1 HOUR CLASS PRICES ARE \$159 FOR 6 WEEK SUMMER SESSION, 45 MIN CLASSES \$141/ 6 WKS
- REGISTER FOR CLASSES ONLINE <https://www.iclassprov2.com/parentportal/flipflogym>

CAMP

- CAMP PRICE IS \$380 PER WEEK **OR** JOIN PER DAY FOR PRORATED PRICING.
- CHILDREN ARE GROUPED BY AGE AND MUST BE 5 YEARS OLD FOR NINJA CAMP, OR 4 YEARS OLD FOR GYMNASTICS CAMP.
- CHILDREN MUST BRING A **PEANUT FREE** LUNCH, SNACK & A WATER BOTTLE. NO CANDY PLEASE.
- REGISTER FOR CAMPS EITHER ONLINE <https://www.iclassprov2.com/parentportal/flipflogym> OR IN PERSON BY CHECKING THE BOXES ON THE FORM ON THE REVERSE SIDE.

	Monday	Tuesday	Wednesday	Thursday
Week 1 7/5-7/8				
Week 2 7/12-7/15				
Week 3 7/19-7/22				
FFG is Closed the week of 7/26				
Week 4 8/2-8/5				
Week 5 8/9-8/12				
Week 6 8/16-8/19				

Flip-Flop Gymnastics Registration Form

381-14 Old Riverhead Rd. WH Beach, NY 11978 Ph. (631) 288-2845

Child's Name _____ D.O.B. _____ Age _____

Parents Name _____ Email Address _____

Mailing Address _____ City _____ State ___ Zip _____ Home

Phone _____ Cell Phone _____

Does your child have any known allergies and/or limitations?_ _____

I fully understand and acknowledge that there are risks and dangers associated with participation in Gymnastics, Tumbling and Ninja Class activities and accept such risks and responsibilities for injuries or damages. I agree not to hold Flip-Flop Gymnastics or any of its instructors or employees liable for injury or damage which may occur to me or my child as a result of participating in classes or related activities. I hereby release, waive, discharge Flip-Flop Gymnastics Inc., its officers, directors, agents and employees from any and all liability to the restraints above while at Flip-Flop Gymnastics.

Signature _____