



# FLIP CITY GYMNASTICS, INC.

29 Cook Street • Billerica, MA • T: 978-667-1604 • F: 978-667- 8577

[www.FlipCityGymnastics.com](http://www.FlipCityGymnastics.com)

## Summer 2009 Registration Form

**June 22 - July 23, 2009**  
**July 25- August 21, 2009**



Parent 1: \_\_\_\_\_ Parent 2: \_\_\_\_\_

Court Appointed Legal Guardian (If applies): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Child's Name: \_\_\_\_\_ boy:  Girl:  D.O.B: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_

By submitting a payment for any program, event, or activity held at or by Flip City Gymnastics, Inc. you have therefore agreed to abide by any and all policies, regulations, and details posted (in-house or web site), verbal, and written. Thank you for your cooperation.

Parent/Guardian/Adult Signature: \_\_\_\_\_

### Summer Class Payments and Policies:

- Discounts: 15% for siblings (off equal or lesser value, higher valued class' child is full price); 15% for a second class per student (off equal or lesser valued class). Higher valued child or class is full price. No double discounts.
- NO REGISTRATION FEES!
- Make-ups are unlimited however, must be completed prior to end of each session, or missed classes are forfeited.
- Our teachers commit their time for the entire session; therefore there are no refunds, prorating, or credits available for these programs. You may take another class to make-up for any missed ones.
- Make-ups are unlimited however make-ups must be scheduled in advance and completed before the end of the session. Make-ups not completed before the end of the session will be forfeited. Make-ups due to inclement weather, blackouts, and holidays, etc. are the sole responsibility of the parent/guardian. Make-ups are offered on a space available only basis during other scheduled class times. There is no guaranteed space for make-ups.
- To pay by check, cash, M/C or VISA: Full Payments must be made at the time of registration. Cash payments may be made at the office. Please do not mail cash. Make checks out to Flip City Gymnastics, Inc. Please write a memo on your check regarding class name, day and time. There is a \$30 processing fee for a returned check. There is a \$15.00 charge for a re-deposited check. Please note returned checks are automatically sent to a check recovery service for electronic deduction from your account. Please remember to include your (1) "Waiver Form" per child, if you do not already have one on file with us and the (2) "Registration Form" per child. Payments may be made by M/C or Visa in person or by the phone. Forms may be faxed to 978-667-8577. When faxing and mailing, please call to follow up that all has been received.
- Flip City Gymnastics, Inc. reserves the right to cancel or reschedule any class at any time for any reason, to changes its policies, procedures, forms, and/or schedules at any time, and to refuse and /or dismiss any child or parent for just and reasonable cause. All schedules are subject to change.
- Flip City Gymnastics, Inc. is not responsible for lost or stolen items.
- Flip City Gymnastics, Inc. is not responsible for misprints.

Session A (4 Weeks) June 22-July 23				Session B (4 Weeks) July 26-August 20			
\$54 LF; \$62 (45min/1 hr); \$140 (2-day tumbling)				\$54 LF; \$62 (45min/1 hr); \$140 (2-day tumbling)			
P	Waiver Date:	Tuition Due\$	Date	P	Waiver Date:	Tuition Due\$	Date:
B	Waiver in computer:	Amount & Method of Payment:		B	Waiver in Computer:	Amount & Method of Payment:	
C	Class/Day/Time:			C	Class/Day/Time:		

**NOTES:**

First name:

Last Name: