Hawk Gymnastics Summer Camp

For current and upcoming Heath HS and Cain MS Gymnasts
and female gymnasts grades 6th thru 12th

Summer camp is a great opportunity for you to learn new skills,
enhance your current skills, and meet new friends!

Times, Cost, and General Information

- Camp Days and Times
  - Monday, Tuesday, Wednesday
  - 8:00 AM - 10:00 AM
- Sessions
  - 1st Session: June 12th - June 14th
  - 2nd Session: June 19th - June 21st
  - 3rd Session: July 10th - July 12th
  - 4th Session: July 17th - July 19th
- Daily Schedule:
  - warm-up, Event and Skill Work
  - Strength/Conditioning, Prehab and Flexibility

- $100.00 a week ($35 per day options also available) checks payable to Amy Heidel

- Location: Rockwall-Heath HS Gymnastics Gym located in the indoor facility

- All gymnast must be covered by their family's medical insurance in case of an illness or injury while attending camp.

- Registration and waiver form must be signed and camp tuition check turned into Coach Heidel before your child can be enrolled in the summer camp.

- If you have any questions, email amy.heidel@rockwallisd.org

*All RISD athletic camps donate a portion of the proceeds to the RISD athletic fee.
*Scholarships Awarded.
*RISD Approved Camp

Registration and Waiver for Gymnastics Camp

Gymnast Name:_____Grade (Next Year):_____

Parent/Guardian Name:_____Cell Phone:_____

Work Phone:_____Parent E-Mail:_____

Camp weeks attending:_____

WAIVER OF CLAIMS

My child has permission to participate in the Hawk Gymnastics Summer Camp. If in the judgment of a representative of the Hawk Gymnastics Summer Camp my child needs immediate treatment as a result of any injury or sickness, I authorize such treatment to be given to my child by any physician, hospital, or representative. I will be fully and completely responsible for any cost incurred due to injury or sickness of my child through participation in the Hawk Gymnastics Summer Camp. I hereby release and indemnify Hawk Gymnastics Summer Camp and coaches from all liability.

Parent/Guardian Name Printed:_____Parent/Guardian Signature/Date: _____