

2018 Livonia Blue Gymnastics Summer Camp

Dates: Week 1 – June 18 – June 21 (4 Days)

Week 2 – August 7 – August 10 (4 Days)

Time: 4pm-7pm

Location: Churchill High School – Gymnastics Room

Cost: (T-Shirt included if turned in by deadline)

Checks Payable to “Livonia Stevenson High School - gymnastics”

NO REFUNDS WILL BE GIVEN

\$75.00 for 1 week

\$135.00 for 2 weeks (price good only if you sign up for both weeks together)

This camp is for all gymnasts ages 11 and up.

The Livonia Blue Gymnastics program has had a tradition in providing a tremendous opportunity for young athletes to practice and showcase their skills, as well as learn new ones and improve old ones. During the camp, your daughter will receive instruction from coaches and work on all events. We will be focusing on conditioning, flexibility, individual skills per event and team building. She will also be able to work on individual skills, participate in team games and have an opportunity to meet gymnasts that are apart of the Livonia Blue Gymnastics Team. It's a chance for your daughter to learn the skills necessary to help prepare her for high school gymnastics.

Deadline: The deadline is June 6th. You can however register the first day of camp, but a T- Shirt is NOT guaranteed. Please complete the registration form and mail to address listed at the bottom of the form. If you wish to register the day of camp, please bring payment with you.

Questions: Please submit any questions to MissLisa621@yahoo.com (Lisa Broomfield-- Head Coach) or 734-765-5439

Stevenson High School Athletics
33500 Six Mile Rd--Livonia, MI 48152
Attention: Lori Hyman, Athletic Director
For Lisa Broomfield – Gymnastics CAMP

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Livonia Blue Gymnastics Summer Camp Registration Form 2018

Name of gymnast _____ Please Circle T-Shirt Size AS AM AL

Please circle the week/s of camp your gymnast will attend:

Week 1 – June 18 – June 21

Week 2 – August 7 – August 10

Age of gymnast _____ Birthday _____

Parent Name _____

Parent Phone _____

Parent Email Address _____

Which grade and school will your daughter will be entering in the Fall of 2017:

What level is your daughter and what club is she from:

I hereby and herein authorize the Director of the Livonia Blue Gymnastics Summer Camp, or any staff working on camps behalf, to act in my stead for the purpose of acquiring emergency medical attention for my daughter or ward. I impose upon the assumptions of this duty the responsibility to act with reasonable care and caution and release and waive all liability for any injuries and illness incurred while at the camp in the event the same is performed pursuant to such standard. By my signature hereunder, I warrant that my daughter or ward is in good physical condition, has no undisclosed medical problems, illnesses or disabilities, and is capable of full and active participation in the gymnastics camp. I also represent that my daughter or ward has received a physical within the last year and is medically competent to participate in the activities at the camp.

Signature of Parent or Guardian: _____

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