



# Tumble with the T-hawks

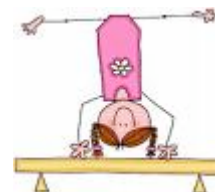
**WHAT:** Gymnastics camp  
run by the Algonquin gymnastics team and coaches

**WHO:** boys and girls grades K thru 5

**WHERE:** ARHS Gymnastics Gym

**WHEN:** February vacation – Tuesday thru Friday,  
February 22<sup>nd</sup>- 25<sup>th</sup> 9am-11am  
Gym Show Finale Friday at 10am

Come learn new gymnastics skills or perfect old ones with the high school gymnastics team and coaches. You can soar over the vault, swing on the bars, balance on the beam and flip on the floor!! Guaranteed fun plus you get a really cool t-shirt!!!



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## Camp Application

NAME: \_\_\_\_\_ M \_\_\_ F \_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: (Please **print** clearly) \_\_\_\_\_

GRADE: \_\_\_\_\_ **T-shirt size** **YS** **YM** **YL** **AS** **AM** **AL**

I, Parent/Guardian agree, by enrolling my son/daughter, that he/she is physically and mentally able to participate in all of the Camp's activities. In case of medical emergency and I cannot be reached, I hereby give permission to the physician selected by the staff to hospitalize and secure medical treatment for the child. I understand that my medical insurance is expected to cover my child for injuries. I agree not to hold the ARHS Gymnastics Camp, its management and staff, and/or ARHS, its management and staff, responsible for any athletic, dental, or bodily injury that may occur to my son/daughter while attending Camp. I realize and acknowledge that ARHS is not sponsoring this Gymnastics Camp.

\_\_\_\_\_  
(Parent or Guardian **Signature**) (Parent or Guardian **Printed Name**)

TUITION: \$75 registration (Checks payable to **ARHS Gymnastics Boosters**)

**MAIL by February 11<sup>th</sup>** TO: Mary Ellen Duggan (Gymnastics Booster Rep).  
47 Fisher St

Northborough, MA 01532

Any questions, contact Mary Ellen Duggan – meduggan62@gmail.com

508-393-1819 or 774-258-1500

**Please make note anything which may affect your child's participation**\_\_\_\_\_

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