

**REGISTRATION FORM:**  
**Return to:**  
**Kathy Corrigan's School of Gymnastics**  
**406 V.F.W. Drive**  
**Rockland, MA 02370**

Camper Name: \_\_\_\_\_ Age: \_\_\_\_\_ New Camper: ( ) Yes ( ) No

If returning from the 2017 Summer Camp season, how many FULL WEEKS did your child attend? \_\_\_\_\_

Address \_\_\_\_\_

Parent/ Guardian Name(s) \_\_\_\_\_ Email \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Business Phone # \_\_\_\_\_

Person Responsible for Payment \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Address & Tel. # \_\_\_\_\_

**FEBRUARY CAMP 2018**

		SPORTS CAMP	GYM CAMP
Tuesday	Feb. 20	( )	( )
Wednesday	Feb. 21	( )	( )
Thursday	Feb. 22	( )	( )
Friday	Feb. 23	( )	( )

**APRIL CAMP 2018**

		SPORTS CAMP	GYM CAMP
Tuesday	April 17	( )	( )
Wednesday	April 18	( )	( )
Thursday	April 19	( )	( )
Friday	April 20	( )	( )

**EXTENDED DAY CARE**

Please write in arrival & departure times below:

Tues.	A.M. _____	P.M. _____
Weds.	A.M. _____	P.M. _____
Thurs.	A.M. _____	P.M. _____
Fri.	A.M. _____	P.M. _____

**FAMILY DISCOUNT 10% OFF TOTAL TUITION FOR 2 OR MORE IN FAMILY ATTENDING THE SAME DAYS. All applications, medicals, camp forms and tuition are due 2 weeks prior to the camp program.** Campers from the 2017 camp season who have their forms and current medical on file with us will only need a parent to make any necessary changes to the forms and to initial and date each form.