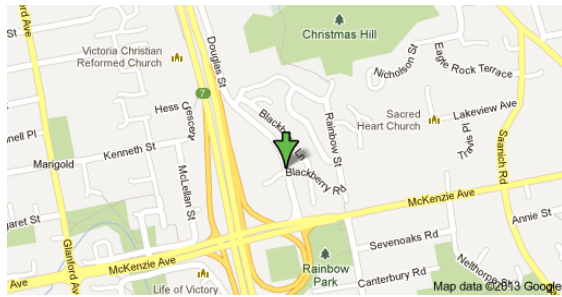




Island Rhythmic Gymnastics Club

Welcome to Island Rhythmic Gymnastics Club. Please read and fill out the two last pages of the package and return them to us with the payment. If you have any questions, please feel free to contact us at any time. We look forward to sharing the beauty of the sport with you and your child.

1. CLASSES HELD AT THE VICTORIA CITADEL: 4030 Douglas Street Victoria BC, V8X 5J6



2. UNIFORM-Mandatory

AGES 3 – 6

Bodysuit – royal blue Mondor 41095 tank style

Shorts (optional) – black Mondor 41020 style permitted

Footwear – bare feet only NO Footundeez permitted

Hair – ponytail or bun, with bangs & layers held back. Metal snapclips allowed. NO headbands or scrunchies permitted.

AGES 7 – 12

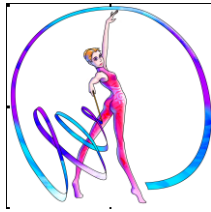
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The Uniform could be purchased at TOES AND TAPS, 1733 Cook St, Victoria, BC V8T 1C8 (250) 480-0017



**ISLAND RHYTHMIC GYMNASTICS
2019 PROGRAMS**

PRE-SCHOOL - 3 to 5 years old

FRIDAY		
TIME: 5:00 pm – 5:30 pm		
CALENDAR: March 15 to June 19th 2019		
COST:		
March - June:	\$90.00 (returning gymnasts)	\$110.00 (new gymnasts: includes BCRSGF registration/ insurance)

RECREATIONAL – 6 years old and up

PROGRAM 1: WEDNESDAY	PROGRAM 2: FRIDAY
TIME: 5:30 pm - 6:30 pm	TIME: 5:30 pm – 6:30pm
CALENDAR: January 9 th - June 19 th 2019	CALENDAR: January 11 th – June 19 th 2019
COST:	COST:
January- June: \$300.00 (returning gymnasts)	January- June: \$290.00 (returning gymnasts)

PERFORMANCE – 6 years old and up (by invitation/ audition)

FIRST AND SECOND YEAR PERFORMANCE GYMNASTS

PROGRAM 1: 2 times 2hrs	PROGRAM 1: 2 times 3hrs	PROGRAM 2: 3 times 3hrs + 1INDIVIDUAL
DAY: Monday and Friday	DAY: Monday and Friday	DAY: Monday, Wednesday and Friday
TIME: 5:00 pm - 7:00pm	TIME: 5:00 pm - 8:00 pm	TIME: 5:00 pm - 8:00 pm
CALENDAR: September 7 th - December 19 th 2018 January 11 th - June 19 th 2019	CALENDAR: September 7 th - December 19 th 2018 January 11 th - June 19 th 2019	CALENDAR: September 5 th - December 19 th 2018 January 9 th - June 19 th 2019
COST:	COST:	COST:
January- June: \$775.00	January- June: \$1,160.00	January- June: \$1,780.00

THIRD YEAR AND UP PERFORMANCE GYMNASTS

PROGRAM 3: 2 times 2hrs	PROGRAM 3: 2 times 3hrs	PROGRAM 4: 3 times 3hrs + INDIVIDUAL
DAY: Monday and Wednesday	DAY: Monday and Wednesday	DAY: Monday, Wednesday and Friday
TIME: 5:00 pm - 7:00pm	TIME: 5:00 pm - 8:00 pm	TIME: 5:00 pm - 8:00 pm
CALENDAR: September 5 th - December 19 th 2018 January 9 th - June 19 th 2019	CALENDAR: September 5 th - December 19 th 2018 January 9 th - June 19 th 2019	CALENDAR: September 5 th - December 19 th 2017 January 9 th - June 19 th 2018
COST:	COST:	COST:
January- June: \$790.00	January- June: \$1,190.00	January- June: \$1,780.00



ISLAND RHYTHMIC GYMNASTICS CLUB

REGISTRATION FORM : FALL 2018, WINTER AND SPRING 2019

All information provided is kept confidential

NAME OF THE GYMNAST: _____

Date of birth (yy/mm/dd) _____

Medical # _____

The program chosen is:

PRE- SCHOOL Friday

RECREATIONAL Wednesday

RECREATIONAL Friday

PERFORMANCE first/ second year gymnasts

2 DAYS X 2 hours Monday- Friday

2 DAYS X 3 hours Monday- Friday

3 DAYS X 3 hours Monday- Wednesday- Friday

PERFORMANCE Third year and up

2 DAYS X 2 hours Monday- Wednesday

2 DAYS X 3 hours Monday- Wednesday

3 DAYS X 3 hours Monday- Wednesday- Friday

I heard about Island Rhythmic Gymnastics through

A friend _____ Island Parent _____ Online search _____ Facebook _____ Chatterblock _____ Childplay 101 _____

Other (specify) _____

CONTACT

Name of the parent/ guardian _____

Address _____

Home phone number _____ Work phone number _____ Cell phone number _____

E-mail _____

Emergency contact _____ Phone number _____

Pick up (person authorized to pick up your child other than yourself)

Name _____ Phone _____

ALLERGIES/ MEDICAL CONCERNS

Does your child have any medical conditions that we should know about? If yes, please list below.

EMERGENCIES

I hereby authorize the staff of Island Rhythmic Gymnastics Club to obtain the aid of a registered medical practitioner or ambulance services to initiate treatment for my child _____ in the event of her illness or accident should attempt to contact the parents/ guardians fail.

Signature of the parent

Date and place

Waiver Form

In consideration of your acceptance of my child's registration, I state that I will not hold responsible Island Rhythmic Gymnastic Club or any of its Executive or coaches, for any personal injuries or property loss or damages suffered by my child while involved with IRGC activities.

NAME of the gymnast _____

Parent/ guardian name

Parent/ guardian signature

Gymnast name (if over 18 years of age)

Gymnast signature (if over 18 years of age)

Date

PHOTOGRAPHS AND VIDEOS

I authorize Island Rhythmic Gymnastics Club to take photos or videos of my child for promotional or educational purposes.

Yes _____

No _____

NAME of the gymnast _____

Parent/ guardian name

Parent/ guardian signature

Gymnast name (if over 18 years of age)

Gymnast signature (if over 18 years of age)

Date

**Please mail completed form and payment to
Island Rhythmic Gymnastics Club
2288 Covington Place, Victoria, BC, V8N 5N6
C/O Danielle Frattaroli
Payment can also be given to the coach on the first day of the session**