

KAATS GYMNASTICS SUMMER CAMP 2025

Dates: JULY 14th – 17th 2025

COST: \$325.00

CAMP T-SHIRT – PROVIDED

Gymnast must provide their own lunch & water bottle

AGES 7 YEARS AND UP

Schedule:

9:00AM - 3:00PM EACH DAY

Camp Location (directly off Hwy 52):

KAATS Gymnastics, Inc.

191 County Road 11 NW

Pine Island, MN 55963

Phone: 507-356-8933

Web site: www.kaatsgymnastics10.com

E-mail: kaatsgym10@aol.com

Gymnasts Name: _____

Parent(s): _____

Age: _____ **DOB:** _____ **Phone(day):** _____

Address: _____

Medical Problems: _____

Insurance: _____

T-Shirt Size (circle): CHILD: S M L ADULT: XSM S M L XL

I fully understand that gymnastic activity may be dangerous and that the gymnast is exposed to the risk of injury. I hereby give permission for my daughter/son listed above to participate in the program and activities at KAATS and release the Club and Coaches from any liability resulting from participation. A Covid assumption of risk form is attached - this must be filled out prior to attending camp,

Parent/Guardian Signature _____

Date _____

Date received _____ **Camp Payment received** _____ **Check #** _____ **Staff Initials** _____