

## **NORTH HARBOUR GYMNASTICS CENTRE (INC)**

### **Mail Address**

Box 100-356  
North Shore Mail Centre  
AUCKLAND

**E-mail:** info@nhgym.co.nz

**Web site:** www.nhgym.co.nz



### **Gymnasium**

NORTH HARBOUR GYMNASTICS  
CENTRE  
Silverfield, Glenfield

Ph. +64 9 443-2570

Fax. +64 9 443-2795

Dear Parents/ Caregivers,

### **Holiday Program**

**Week 1: 5<sup>th</sup> to 8<sup>th</sup> July 2010**

**Week 2: 12<sup>th</sup> to 15<sup>th</sup> July 2010**

**9am – 3pm Weekdays**

We are pleased to be able to offer a gymnastics holiday program for the up coming school holidays. Our program will include a mixture of artistic and rhythmic gymnastics, games and a different activity each day of the week, including a trip to the movies, and ten-pin bowling.

### **Week 1**

**Monday** - Gymnastics classes with crafts in the afternoon

**Tuesday** – Gymnastics classes and games day

**Wednesday** – Movies, cinema movie with popcorn and gymnastics class to follow  
(We will make our own popcorn to take to the movies)

**Thursday** – Art class plus gymnastics classes including rhythmic and artistic gymnastics  
(Please provide old clothes for painting in)

### **Week 2**

**Monday** - Art class plus gymnastics classes including rhythmic and artistic gymnastics  
(Please provide old clothes for painting in)

**Tuesday** – Gymnastics classes with crafts in the afternoon

**Wednesday** – Ten-pin bowling gymnastics classes in the afternoon

**Thursday** – Gymnastics classes and games day with a competition in the afternoon

Children will need to bring their own lunch and morning tea. Loose fitting clothing should be worn while in the gym, bare feet, no jewelry, and hair tied up. Depending on the activity please ensure they wear appropriate clothing and have comfortable closed walking shoes as well as warm wet weather gear just in case. Children will be under adult supervision at all times with a ratio of 5:1 adults. We will use buses to transport the children to activities.

### **Price:**

9am – 3pm: \$35 per day excluding cost for activities

(\$10 Discount when booking upfront for the full week, i.e. Monday - Thursday)

### **Prices for activities:**

#### **Week 1**

Wed 8th – Movies \$14

#### **Week 2**

Weds 15th – Ten-pin bowling \$14

Please note we reserve the right to amend the program or cancel outings if there are insufficient numbers or unfavorable weather conditions.

If you have any questions or need more information please see Emma in the office or call 4432570.

## **Holiday Program Enrolment Form**

### Medical Information and Treatment Consent

The following information and consent is requested to ensure the health and well-being of all children. The information contained is confidential and will only be used to safe guard and promote the gymnasts health and well-being should the need arise.

**Childs Name:** \_\_\_\_\_ **Age and Date of Birth:** \_\_\_\_\_

**Parents Names and Contact Details:** \_\_\_\_\_

**Second Emergency Contact:** \_\_\_\_\_

Please tick if your child suffers from any of the following:

Migraine <input type="checkbox"/>	Epilepsy <input type="checkbox"/>	Chronic nose bleeds <input type="checkbox"/>
Travel Sickness <input type="checkbox"/>	Fits of any type <input type="checkbox"/>	Dizzy Spells <input type="checkbox"/>
Asthma <input type="checkbox"/>	Diabetes <input type="checkbox"/>	

Other pre-existing illness or medical condition (please specify) \_\_\_\_\_

Is your son/daughter currently taking any medication?      Yes      No

If yes please specify: \_\_\_\_\_

Please tick if your son/daughter is allergic to any of the following:

Prescription Medicine <input type="checkbox"/>	Food <input type="checkbox"/>	Insect bites/stings <input type="checkbox"/>
Plants <input type="checkbox"/>	Other allergies <input type="checkbox"/>	

Give details of allergy: \_\_\_\_\_

What treatment is required? \_\_\_\_\_

All supervisors while out of the gym will be 18 years + and first aid certified. The groups will have a minimum ratio of 1:5 while on excursion.

Please note that while we take every precaution to ensure your child's safety both inside and outside North Harbour Gymnastics Club will not be held liable for any loss of, damage to or injury to any persons or property while your child is in our care. By signing this form you agree to the terms above:

(Parent/ Guardian Signature): \_\_\_\_\_

Please circle the following options for enrolment in the holiday program:

Weeks:                      Week 1                      Week 2                      Both weeks

**Days on Week 1**

Monday 5 <sup>th</sup>	Tuesday 6 <sup>th</sup>	Wednesday 7 <sup>th</sup>	Thursday 8 <sup>th</sup>	All Week
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**Days on Week 2**

Monday 12 <sup>th</sup>	Tuesday 13 <sup>th</sup>	Wednesday 14 <sup>th</sup>	Thursday 15 <sup>th</sup>	All Week
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**Price:**

9am – 3pm: \$35 per day excluding cost for activities  
(\$10 Discount when booking upfront for the full week)

**Prices for activities:**

**Week 1**

Wed 8<sup>th</sup> – Movies \$14

**Week 2**

Weds 15<sup>th</sup> – Ten-pin bowling \$14

Please note we reserve the right to amend the program or cancel outings if there are insufficient numbers or unfavorable weather conditions.