

Harford County Department of Parks and Recreation  
ACPR GYMNASTICS REC. COUNCIL



2018  
WINTER GYMNASTICS  
OFFERED FOR KINDERGARTEN AND UP

Register by mail, online or drop-off at the Recreation Center.  
Credit card payment available at [www.acprgymnastics.siplay.com](http://www.acprgymnastics.siplay.com).

Mail to:  
ACPR Gymnastics  
P.O. Box 248  
Churchville, MD 21028

For more information, call 410-638-3853 or  
email [cornngym@comcast.net](mailto:cornngym@comcast.net)  
Check out our website at  
[www.acprgymnastics.com](http://www.acprgymnastics.com)

**Saturday Classes**

1st Class will be held on **September JANUARY 20TH**

<u>Time</u>	<u>Class Name</u>
12:15 to 1:15 p.m.	7 to 8 year olds
1:15 to 2:15 p.m.	Intermediate*
2:15 to 3:15 p.m.	5 to 6 year olds
3:00 to 4:30 p.m.	Advanced**

**Thursday Classes**

1st Class will be held on **JANUARY 18TH**

<u>Time</u>	<u>Class Name</u>
4:30 to 5:30 p.m.	5 to 6 year olds
5:30 to 6:30 p.m.	9 yrs. and older
6:30 to 7:30 p.m.	7 to 8 year olds
7:30 to 8:30 p.m.	5 to 6 year olds

**Monday Classes**

1st Class will be held on **JANUARY 22ND**

<u>Time</u>	<u>Class Name</u>
4:30 to 5:30 p.m.	7 to 8 year olds
5:30 to 6:30 p.m.	9 years and up

**Friday Classes**

1st Class will be held on **JANUARY 19TH**

<u>Time</u>	<u>Class Name</u>
4:30 to 5:30 p.m.	Intermediate*
5:30 to 6:30 p.m.	7 to 8 year olds
6:30 to 7:30 p.m.	5 to 6 year olds
7:30 to 8:30 p.m.	7 to 8 year olds

**Tuesday Classes**

1st Class will be held on **JANUARY 16TH**

<u>Time</u>	<u>Class Name</u>
2:00 to 3:00 p.m.	Homeschool—5 to 7 yr. olds
3:00 to 4:00 p.m.	Homeschool—8 yrs. and older
4:30 to 5:30 p.m.	Boys only—7 yrs. and older
5:30 to 6:30 p.m.	Basic Tumbling & Tramp 5-6 year olds
6:30 to 7:30 p.m.	Basic Tumbling & Tramp 7 yrs. and older
7:30 to 8:30 p.m.	Intermediate Tumbling/Tramp*
8:15 to 9:15 p.m.	Advanced Tumbling/Tramp**

**Wednesday Classes**

1st Class will be held on **JANUARY 17TH**

<u>Time</u>	<u>Class Name</u>
4:30 to 5:30 p.m.	9 yrs. and older
5:30 to 6:30 p.m.	Intermediate*

**\*Intermediate skill requirements-**

Backbend or kickover, cartwheel and round off

**\*\*Saturday Advanced class skill requirements**

Back handspring, round off, and pullover on bars

**\*\*Advanced Tumbling/Tramp skill requirements**

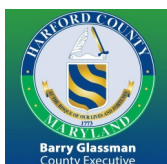
Back handspring

All classes will be held at the Churchville Rec. Center and are on a first come basis contingent upon sufficient registration. Unless you are otherwise notified, you may assume that the class will be held as scheduled.

**No refunds or transfers of registration.** No registration will be taken without payment.

**Fee: \$130.00 for 12 weeks**

**\$190.00-ADVANCED GYMNASTICS, SATURDAYS**



**2018 WINTER GYMNASTICS REGISTRATION**

<b>DAY:</b>	<b>TIME:</b>	<b>CLASS NAME:</b>
<b>CHILD'S NAME:</b>	<b>PHONE #:</b>	
<b>ADDRESS:</b>	<b>ZIP:</b>	
<b>DATE OF BIRTH:</b>	<b>AGE:</b>	
<b>PARENT'S NAME:</b>		
<b>E-MAIL ADDRESS:</b>		
<b>EMERGENCY NAME &amp; PHONE #:</b>		
<b>AMOUNT PAID</b> _____	<b>CASH (exact amount)</b>	<b>CHECK#</b> _____

~~Credit card payment accepted for online registration only. Go to [www.acprgymnastics.siplay.com](http://www.acprgymnastics.siplay.com)~~

I do hereby expressly agree to release Harford County, Maryland, a body corporate and politic of the State of Maryland, and its elected and appointed officials, agents, officers, and employees, and ACPR Gymnastics Recreation Council and its instructors from all liability arising from any harm or injury, including death, sustained by me while participating in this program. I understand that there is an inherent risk involved in any program. I certify, by my signature, that I understand this and agree. I also certify that my child is physically capable of participating. I will make the instructors aware of any allergies and/or medical problems. By my signature I acknowledge my understanding of the Concussion Information, SB771/HB858, which requires that all parents/guardians and athletes be made aware of the dangers a concussion may have on an athlete. This can be found at the Center for Disease Control, [www.cdc.gov/headsup/youthsports/index.html](http://www.cdc.gov/headsup/youthsports/index.html). Also the Sudden Cardiac Arrest, HB 427, which requires that all parents and athletes be made aware of the dangers that sudden cardiac arrest may have on an athlete, found at [www.nhlbi.nih.gov/health/health-topics/topics/scda](http://www.nhlbi.nih.gov/health/health-topics/topics/scda). Further information on both can be found by calling 1-800-232-4636.

Child's name \_\_\_\_\_ Parent's name \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

Any physical conditions or allergies that the instructor should be made aware of \_\_\_\_\_