



10449 Midwest Industrial Drive  
 Saint Louis, MO 63132  
 314-426-2496 fax 314-426-1898  
 www.allamericangymnastics.net

### 2008 Summer Class Descriptions

#### **PRESCHOOL PROGRAM**

**(FAM) Family Class-** This is a class is for children ages 22 months-Pre K, which is structured play, focusing on the child's motor skills. This allows for families to get all of their younger children in class at the same time. \*Parent Participation Required for children ages 22 months-3 years.

**(PRE) Preschool-** Weekday morning and afternoon preschool gymnastics classes for children ages 3-5 years.

**(AP) Adv Preschool-** A by invitation only class, for girls ages 3 - 4 years old, designed to transition into the team program. Please contact AAG for more information.

#### **SCHOOL AGE PROGRAM**

**(RS) Red Stars-**A class for 5 year olds, designed to transition children from the Preschool Program to the School Age program.

#### **For children ages 6 years & up:**

**(WS) White Stars-** An introductory class teaching girl's USAG Level 1 gymnastics skills.

**(BS) Blue Stars-** A class for girls who have mastered all of the White Star skills, teaching girl's USAG Level 1 & 2 gymnastics skills.

**(SS) Silver Stars-** For girls who have mastered all of the Blue Star skills, teaching girl's USAG Level 2 gymnastics skills.

**(GS) Gold Stars-** For girls who have master all of the Silver Star skills, teaching girl's USAG Level 3 gymnastics skills.

**(10+) 10+ Class-** A class for girls ages 10 and up. This class focuses on both beginner and advanced gymnastics skills.

**(BOYS) Boys Class-** A class for boys teaching basic boys gymnastics skills and conditioning.

**(Sup St) Super Stars-** A class designed for children with special needs using gymnastics to teach basic motor skills, body & spatial awareness and a positive self esteem. This class has a low student to teacher ratio (6:2).

**(PC) Pre Competitive-** A by invitation only class, for girls ages 5 and up, designed to transition into the team program. Please contact AAG for more information.

#### **TRAMP & TUMBLING PROGRAM (1<sup>st</sup> grade & up)**

**(T&T) Tramp & Tumble-** An introductory class, which uses the trampoline, tumble trak, rod floor and spring floor to teach basic tramp and tumble skills.

**(T&T2) Tramp & Tumble 2-** A class for children who a back handspring on floor, which use the trampoline, tumble trak, rod floor and spring floor to teach advanced tramp and tumble skills.

#### CLASS RATIO/LENGTH

6:2- Sup St

6:1- PRE (55MINUTES)

8:1- FAM, RS, WS, BS, BOYS, 10+, TT (55 MINUTES)

10:1- TT 2, SS, GS (1 HOUR 25 MINUTES)

## All American Gymnastics 2008 Summer Schedule

#### MONDAY

10:00	FAM	
11:00	PRE	
12:00	WS/BS	
1:00	PRE	
2:00	RS/WS	
3:00	Sup St	
4:00	PRE	WS/BS
5:00	RS/WS	TT
6:00	PRE	BOYS
7:00	T&T 2	SS/GS

#### TUESDAY

10:00	FAM	
11:00	PRE	WS/BS
12:00	RS/WS	BOYS
1:00	PRE	WS/BS
2:00	WS/BS	TT
4:00	PRE	RS/WS
5:00	WS/BS	BOYS
6:00	WS/BS	Sup St

#### WEDNESDAY

10:00	PRE	
11:00	WS/BS	
12:00	FAM	
1:00	PRE	
2:00	BOYS	
4:00	PRE	WS/BS
5:00	FAM	WS/BS
6:00	RS?WS	10+

#### SATURDAY

9:00	FAM	WS/BS
10:00	PRE	RS/WS
11:00	PRE	WS/BS

**DON'T SEE A CLASS THAT WORKS FOR YOUR GROUP/FAMILY?  
 GIVE US A CALL AND WE CAN TRY TO SET UP SOMETHING THAT  
 WORKS WITH YOUR SCHEDULE & OURS!**

(MINIMUM OF 2 CHILDREN NEEDED TO START SPECIAL CLASS)

**ALL AMERICAN OFFERS 100% TUITION BACK GUARANTEE:** If after your families first session at All American you are not entirely happy with our program we will gladly refund 100% of your tuition for that session. Note our money back guarantee is for families brand new to All American, however existing families with new siblings trying classes for the first time will be extended a credit towards the future session/month.

# REGISTRATION INFORMATION SHEET

## REGISTRATION INFORMATION

**REGISTRATION METHODS:** In order to register for class, each gymnast must fill out a registration form and submit full payment (Session tuition and annual registration fee). Registration may be done in person, through the mail or by fax. Due to classes filling quickly, phone and fax registration can only hold the gymnast spot for 1 week without registration form and payment.

**SESSIONS:** All American offers four 10 week sessions during the school year (August-June) and one summer session (June-August).

**PSDD:** The PSDD is pre-session due date, which allows active members to re-register for the next session. PSDD invoices will be sent home with the gymnast. If the gymnast is not re-registered by the PSDD our computer system automatically drops them from the program. Their spot is then forfeited and it is not guaranteed that space will be available in the same class, day or time. Any remaining spots after the PSDD will be filled on a first come first serve basis to new and existing members.

### 2008 Summer Calendar

Session #	PSDD	Start Date	End Date	Dates Closed
4	Mar 8 by 12:00 pm	Mar 31	June 7	May 26*
Summer	Open	June 16	August 16	June 30-July 5**
1	Open	Aug 25	Nov 1	Sept 1
2	Oct 18 by 12:00 pm	Nov 3	Jan 16	Dec 22-27** Dec 31 @ 4pm-Jan 1*

\*Dates the gym is closed due to holidays or meets, please schedule a make up class. (May 26, Sept 1, Dec 31 @ 4-8 pm, Jan 1)

\*\*June 30-July 5 is summer break & Dec 22-27 is winter break, which is built into the session, no make ups needed.

## TUITION PAYMENT INFORMATION

### SUMMER CLASS PRICES:

#### 55 Minute Class: FAM, PRE, RS, WS, BS, BOYS, 10+ T&T I

	PRICE
8 week session (June 16-August 16)	140.00
Part 1 (June 16-July 19)	80.00
Part 2 (July 21-August 16)	80.00

#### 1 Hour 25 Minute Class: SS, GS, T&T II

	PRICE
8 week session (June 16-August 16)	215.00
Part 1 (June 16-July 19)	115.00
Part 2 (July 21-August 16)	115.00

### LOOKING TO SAVE SOME MONEY?

### ASK ABOUT OUR LOW ENROLLMENT CLASS DISCOUNTS!!

**\*NEW PRICES\* ANNUAL REGISTRATION FEE:** Every gymnast is charged an annual registration fee, which due at the time of registration.

1st Child-\$35 Family (2+ siblings)-\$50

**\*NEW\*- DURING THE SUMMER SESSION NEW MEMBERS DO NOT PAY A REGISTRATION FEE UNTL SESSION 1.**

**10 % FAMILY DISCOUNT:** All American offers 10% off tuition for families with 2 or more siblings enrolled in the program.

**25% OFF THE SECOND CLASS:** All American offers 25% off price of a class, if a gymnast should choose to take more than one class.

## RULES AND REGULATIONS

**RELEASE FORMS:** In order to participate in any of All American Gymnastics Programs, every gymnast ***must have a parent signed release form.*** **Participation in class will not be allowed without a release form.**

**MAKE UPS/MISSED CLASSES:** All American Gymnastics allows missed classes to be made up in classes with low enrollment. **Make ups in class must be scheduled with our office one week in advance; no walk-ins will be allowed to participate. You have 1 month from the date of the missed class to make up a class. Make ups are not transferable to other children/siblings or for credit towards the next session.**

**REFUNDS:** All American does not offer refunds for dropping or missing class. Once the session has begun you are in the class for its entirety. (Exception: Medical excuses-All American will offer a credit to your account if a medical situation arise that limits the gymnast from participating in class. A physician's note will be required. You must notify our office within 1 week of the first missed class.)

**CLASS CHANGES/CANCELATIONS:** All American reserves the right to cancel or change a class when needed due to low enrollment, instructor changes, weather or gym conditions. In this case you will be asked to choose an alternative class or choose a make up class. **NO REFUNDS OR CREDITS WILL BE GIVEN.**

**FREE TRIAL CLASS:** All American offers a free trial class to gymnasts new to our program. This offer is not available to gymnasts who have previously been enrolled in classes at All American Gymnastics.

**INCLEMENT WEATHER:** In the event of inclement weather, please call the gym or check our website to find out if classes are cancelled. Morning/afternoon classes will be cancelled by 8:00 am and evening classes will be cancelled by 2:00 pm. If classes are cancelled due to weather, please call our office to schedule a make up class. **NO REFUNDS OR CREDITS WILL BE GIVEN.**

**PRIVATE LESSONS:** Call our office or stop by the front desk to schedule a private lesson with the coach of your choice. Private lessons are only available to gymnasts who are enrolled in classes at All American or children who are needing cheerleading, boys' team or special needs privates. All participants must fill out a registration form and pay an annual registration form.

**LOW ENROLLMENT DISCOUNT CLASSES:** If you are looking to save some money, ask about our special low enrollment discount classes. We need to fill all of our classes, even those hard to fill times, so we are offering these specific classes at discounted price in order to fill them. They will be announced 1 week after the start of the session.

**PAYMENT METHODS:** All American accepts cash, money orders, Visa, MasterCard and Discover. **NO PERSONAL CHECKS ACCEPTED.**

# ALL AMERICAN GYMNASTICS SUMMER 08

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## STUDENT INFORMATION

Child's Name \_\_\_\_\_

Sex \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Mom's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Dad's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Family E-Mail Address \_\_\_\_\_

## EMERGENCY INFORMATION

Emergency Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Physician \_\_\_\_\_ Hospital \_\_\_\_\_

Medical Conditions \_\_\_\_\_

## CLASS INFORMATION

1st Class Choice \_\_\_\_\_

	CLASS NAME	DAY	TIME
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2nd Class Choice \_\_\_\_\_

	CLASS NAME	DAY	TIME
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**(UNLESS CONTACTED PLEASE ATTEND YOUR 1ST CHOICE CLASS!)**

## PAYMENT INFORMATION

Annual Registration \_\_\_\_\_ + Tuition \_\_\_\_\_ = Total Enclosed \_\_\_\_\_

**Payment Method (NO PERSONAL CHECKS ACCEPTED)**  
 \_\_\_ Cash \_\_\_ Credit Card \_\_\_ Money Order (IF MAILING REGISTRATION WITH CREDIT CARD PAYMENT, PLEASE FILL OUT THE INFORMATION BELOW.)

Cardholder's Name \_\_\_\_\_

Card # \_\_\_\_\_ Sec. Code (3 digits) \_\_\_\_\_

Expiration Date \_\_\_\_\_ Cardholder's Signature \_\_\_\_\_

# ALL AMERICAN GYMNASTICS RELEASE/WAIVER

## Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

In consideration of participating in the activities held and/or run by All American Gymnastics, Inc., I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releases" named below; and that there may be other risks either know to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as result of my participation in the Activity.

I hereby release, discharge, and covenant no to sue, All American Gymnastics, its Respective administrator, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations and future agrees that if despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. **If 18 or over please sign in the box below, if not please sign under parental consent.....**

\_\_\_\_\_

Printed name of participant

\_\_\_\_\_

Signature of Participant

\_\_\_\_\_

Date

## Parental Consent

AND I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the Minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby Release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLDHARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasees may incur as result of any such claim. I understand that tuition and the yearly registration fee is due prior

\_\_\_\_\_

Printed name of Parent/or Legal Guardian

\_\_\_\_\_

Signature of Parent/or Legal Guardian

\_\_\_\_\_

Date

## Financial Responsibility, Permission for Medical Treatment and Registration Information

I understand that tuition and the yearly registration fee is due in full prior to the start of gymnastic classes.

I certify that the person participating is in good health. I hereby authorize simple first aid and consent to any x-rays, exams and medical or surgical diagnosis which are deemed necessary. I have read and understand the Registration Information sheet.

\_\_\_\_\_

Signature Parent/or Legal Guardian or Participant (18 or over)

\_\_\_\_\_

Date