

HAYDEN PARKS & RECREATION

OPEN GYM TUMBLING FOR TOTS

Dates: Wednesdays October 5-December 14
Location: Routt County Fairgrounds Exhibit Hall
Time: 10am-12pm
Cost: \$5/session OR \$25/month
Ages: 18 months to 5 years
Attire: Please dress children in comfortable, non-restrictive clothing.



Tumbling encourages children to move creatively through games, songs, and stretching. Tumbling gives children a well-defined base to build their motor coordination. During this early age, your child is constantly learning new skills; walking, running and jumping. Sometimes these activities come with multiple opportunities for bumps and bruises as they find their center of gravity and the necessary level of coordination. This program will provide some informal tumbling instruction while allowing children to burn off some energy in a safe, open-gym environment.



REGISTRATION AND FEES: YOU CAN PAY UP FRONT OR PAY AS YOU GO!

DROP-IN: registration form (due first time) and Pay \$5
MONTHLY: registration form and \$25 due first class of the month

HAYDEN PARKS & RECREATION REGISTRATION FORM

Drop off completed form with payment to:
 Hayden Town Hall OR mail to: PO Box 190 Hayden, CO 81639-0190
 Info: Call 276-3741 or email jill.delay@haydencolorado.org

PARTICIPANT NAME _____ AGE _____
 (FIRST) (LAST)

PROGRAM NAME: **OPEN GYM TUMBLING FOR TOTS**

FEE \$5 OR \$25 - METHOD OF PAYMENT: CASH CHECK # _____ AMT ENCLOSED \$ _____

PRIMARY CONTACT – PARENT/GUARDIAN (UNDER 18): PARTICIPANT HEALTH CONCERNS? _____

1 PARENT/GUARDIAN NAME _____ PHONE: _____

2 PARENT/GUARDIAN NAME _____ PHONE: _____

MAILING ADDRESS _____ E-MAIL ADDRESS _____

Liability, Photo, and Medical Release Statement: (must be signed by participant (parent or legal guardian if under 18)
 I understand that the registered activities & services may have an element of hazard or inherent danger & I take full responsibility for participant actions & physical condition. I agree to indemnify & hold the Town of Hayden & it's employees from any liability loss, cost or expense (including attorney's fees, medical & ambulance costs) that participant may incur while participating in Recreation activities. I give my consent to use any photographs or videotape taken in future promotional or marketing materials. Payment of fees & participation in recreation activities shall constitute acceptance of the liability waiver, photo release and medical release.

Participant Signature (parent/guardian if under 18) _____

Date _____