

Recreational Programs 2020-2021 Located at Unit 2 - 781 Kapelus Drive,

West St Paul

Contact keystonekips@mts.net or 204-694-8096

Mail Registration Forms and Payment to:

Keystone Kips Gymnastics 2-781 Kapelus Dr West St Paul, MB R4A 5A4

- Registrations will not be accepted without complete registration forms, deposit and posted dated cheques.
- Registrations are processed in the order they are received. As classes fill up, they will be posted on our website. There will be no further notification unless the class is full.
- Each class has a limited number of spaces to maintain the coach to gymnast ratio.

General Information:

- Classes commence Saturday September 12th, 2020 and will finish June 12, 2021.
- Classes will not be pro-rated due to statutory holidays and exclusion dates
- All fees include a \$45 Non-Refundable MGA insurance Fee (Sept -Aug), Admin Fee, and GST
- 10% Discount off club registration for every additional child. Discount applied to lowest fee (Parent and Tot & Mini Kips not included).
- Payments can be made by cash or cheque only. Cheques should be made out to Keystone Kips • Gymnastics. Classes paid in full can be done by e-transfer.
- NSF cheques subject to a \$25 processing fee.
- Deposit will not be refunded at any time. No refunds will be given for classes attended. No refunds issued • after the 3rd class into the program for any reason. At the discretion of Keystone Kips, make up classes or credit towards future programming may be given for classes missed due to Government of Manitoba Public Health Order or Public State of Emergency closures.
- There will be a \$30.00 admin fee for refunds on **Mini Kips and Parent &Tot Classes.** No refunds after the 3rd class.
- All participants must have bare feet, hair tied back, and jewellery removed. Gymnasts should wear clothing they can easily move around in such as leotards (no skirts), tights, or shorts and a t-shirt.
- Keystone Kips will be closed on the following dates:

Thanksgiving	Oct 12/20	Keystone Kips Classic	ТВА
Remembrance Day	Nov 11/20	Spring Break	Mar 29- Apr 1/21
Winter Break	Dec 21-Jan 3/21	Good Friday-Easter Sunday	Apr 2-Apr 4/21 inclusive
Louis Riel Day	Feb 15/21	Victoria Day Weekend	May 22-24/21 inclusive

Keystone Kips reserves the right to cancel classes due to inclement weather, competitions, shows, displays, clinics etc.

Classes start the week of Sept 12/20 for fall, Jan 4/21 for Winter, Apr 5/21 for Spring

Parent & Tot (Ages 1-3) – 45 minute classes - Parent participation required.

*Note: If you have completed a session in the 2020/2021 and are registering for another session you do not pay the MGA fee of \$45.00 again. All prices below include the MGA fee

Fall Session (13 classes) \$280.00* 9:00 am or 10:00 am Sat

Winter Session (11 classes) \$245.00* Spring Session (8 classes) \$190.00* Sat 9:00 am or 10:00 am

9:00 am or 10:00 am Sat

Classes start the	e week of Sept	12/20 for fall, 、	Jan 4/21 for V	Ninter, Apr &	5/21 for Spring	
Mini Kips (Ages 3-4)) – 45 minute class	es -Basic gymnast	tics movements,	no parent parti	cipation required.	
*Note: If you have <u>cc</u> <u>fee of 45.00</u> again. A			and are registeri	ng for another s	ession you do not pay	the MGA
Fall Session (13 cla	sses) \$280.00	Winter Session	<u>n</u> (11 classes) \$2	245.00* <mark>Sprir</mark>	n <mark>g Session</mark> (8 classes)	\$190.00*
Mon, Tues, Wed, Thu pm Sat	urs, or Fri 5:00 9:15 am	Mon, Tues, Weo pm Sat	d, Thurs, or Fri 9:15 an	pm	Tues, Wed, Thurs, or F	Fri 5:00 5 am
Sat	10:15 am	Sat	10:15 a			5 am
<u>Kips 1</u> – 1 hour class One-time payment o	-		•••	•	the month Oct/Nov/De	c)
Mon, Tues, Wed, Thu	urs or Fri. 5:00 –	6:00 pm S	Sat 9:00 – 10:	00 am or	10:00 – 11:00 am	
<u>Kips 2</u> 1 hour classe One-time payment o	•••		•	•••	astics experience. the month Oct/Nov/De	c)
Mon, Tues, Wed, Thu	urs or Fri. 5:00 -	- 6:00 pm S	Sat 9:00 – 10:	00 am or	10:00 – 11:00 am	
<u>Kips 3</u> – 1.5 hour cla One-time payment c	••		•	•••	nnastics experience. the month Oct/Nov/De	c)
Mon, Tues, Wed, or ⁻	Thurs 6:00 –	7:30 pm S	Sat 11:00 – 12	2:30 pm or	12:30 –2:00 pm	
gymnastics experien	ce.				ed Kips 3 or have mode f the month Oct/Nov/L	
	pm & Sat 11:00-7		Tues		n & Sat 11:00-12:30 p	
Wed 6:00 - 7:30	pm & Sat 12:30-2	2:00 pm	Thurs	6:00 - 7:30 pn	n & Sat 12:30-2:00 pn	n
gymnastics experiend and perform them at	ce. This is an adva optional in-house f	nced recreational l un meets througho	level that gives gout the year.	gymnasts the op	sed Kips 4 or have adv oportunity to put togethe f the month Oct/Nov/L	er routines
) pm & Sat 2:00 -) pm & Sat 2:00 -	•	Wed	7:00 - 9:00 pr	n & Sat 2:00 - 4:00 pr	n
<u>Boys 1</u> – 1.5 hour cla One-time payment (-	••	•	nce. the month Oct/Nov/De	ec)
Thurs 5:	:30 – 7:00 pm					
		•	•		derate gymnastics expe the month Oct/Nov/De	
Thurs 7	/:00 – 9:00 pm					
Keystone Kips Gy	mnastics is not re	esponsible for ar	ny lost or stole	n items, pleas	e do not allow your	child to

bring valuables to the gym.

Keystone Kips Gymnastics Inc GST #826337685RT0001 (PLEASE PRINT CLEARLY)

Class:	Day:	Time:
Participant Information	on:	
First Name:	Last Nam	e:
Address:	City: _	Postal Code:
Gender: Age: _	Date of Birth (N	/IM-DD-YYYY):
Returning Member:	Member: New Member:	
MB Medical Registration	on #: Pe	ersonal Health ID #:
Any medical/other inform	nation the club should be awa	re of:
Any medical/other inform 		re of:
Parental Contact Info	rmation:	re of:
Parental Contact Info	rmation: Ema	
Parental Contact Info Mother's Name: Home #:	e <u>rmation:</u> Ema Cell #:	il:
Parental Contact Info Mother's Name: Home #: Father's Name:	e <u>rmation:</u> Ema Cell #: Emai	il: Work #:
Parental Contact Info Mother's Name: Home #: Father's Name: Home #:	e <u>rmation:</u> Ema Cell #: Emai	il: Work #: :: Work #:

Reystone Rips Gymnastics Inc. is paperless. All communication will be done via email. Our website and social media applications will be updated with information as it occurs as well. All personal information on this form will be made available to coaches. This information will not be shared with outside sources.

How Did You Hear About Us?	
Selkirk Record	Facebook
Times or Herald	Instagram
Leisure Guide	Word of Mouth
Mail/Flyer	Other:

Parental Release Form

I have attained the age of majority and am the parent/guardian of

(my "Child"). I understand and acknowledge that my Child will be participating in a strenuous athletic activity that involves risks that may result in serious injury and, in consideration of Keystone Kips Gymnastics Inc. permitting my Child to participate in the above-noted gymnastics class(es) (the "Classes"), I acknowledge and agree that:

- 1. I assume and accept all risks, dangers and hazards in connection with my Child participating in the Classes.
- 2. I release, on my own behalf and on behalf of my Child, Keystone Kips Gymnastics Inc., together with its members, shareholders, directors, officers, employees, insurers, contractors and agents (collectively, the "Releasees") from all claims, demands, losses, damages, costs and liabilities whatsoever ("Claims") in respect of personal or emotional injury or death or real or personal property damage or any other loss ("Losses") that my Child may suffer or incur by reason of, or in any way arising out of, my Child participating in the Classes, due to any cause whatsoever.
- 3. I will not initiate or commence any claim or action against any of the Releasees, whether on behalf of my Child or on my own behalf.
- 4. That the Releasees are not responsible for safe-guarding my personal property or the personal property of my Child, and accordingly, I confirm that the Releasees are not responsible for any loss, theft or damage to such personal property, whether or not such loss, theft or damage occurs while my Child is participating in the Classes.
- 5. I will indemnify and save harmless the Releasees from and against all Claims which may be brought against the Releasees by or on behalf of my Child or by any other person (including any other parent or guardian of my Child) in respect of Losses that my Child or any such other person may suffer or incur by reason of, or in any way arising out of, my Child participating in the Classes, due to any cause whatsoever.
- 6. I will not make any Claim or commence or continue any legal action against any person, company or other entity that might claim contribution, indemnity or other relief from the Releasees, whether under statute or otherwise, by reason of, or in any way arising out of, my Child participating in the Classes.
- 7. This Release and Indemnity shall apply whether or not any such Claims or Losses arise from an act or omission of any of the Releasees and whether or not any such act or omission may have constituted negligence, breach of contract, nuisance, misfeasance, tort or any other cause of action whatsoever.

It is the responsibility of the parent/guardian below to meet all financial requirements. Keystone Kips Gymnastics Inc. does not coordinate payments between ex-spouses.

Parent/Guardian Signature: ______Date: _____Date: _____Date: _____Date: ______Date: ______Date: _____Date: ____Date: _____Date: ____Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: ____Date: ____Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: _____Date: ____Date: _____Date: ____Date: _____Date: _____Date: _____Date: ____Date: ____Date: __

We will be taking photographs and video of athletes during practice, competitions and during the year end display. The photographs and video taken may be used in our website as well as in media coverage. By signing below, you give Keystone Kips Gymnastics Inc. permissions to use photographs and /or video of your child on our website and other media venues.

Parent/Guardian Signa	ture:		Date:	
Office Use:				
Deposit	Cash	1 st Payment	Cash	2 nd Payment
3 rd Payment	Cash	4 th Payment	Cash	_5 th Payment
6 th Payment	Cash	7 th Payment	Cash	8 th Payment
9 th Payment	Cash	10 th Payment	Cash	11 th Payment