

RHYTHMIC GYMNASTIC EXTRAVAGANZA!

You won't find a Camp like this anywhere else!

JUNE 18-22 AND JUNE 25-29, 2018

Contact: beatrice_ruggeri@icloud.com – 919.951.4775

These two weeks of half day camp will be dedicated to basic elements of Rhythmic Gymnastic and modern dance with an introduction to a very special apparatus: **the Pilates exercise Ball.**

We will use the balls in a traditional way, practicing healthy exercises to build strength, improving the flexibility and support the balance.

We will also use the balls in a unconventional way to create a fun choreography to share with our parents on Friday.

These Camps are for boys and girls!

SCHEDULE

- Arrivals 8.30-9
- Warm up and practice 9-10
- Snack and rest 10-10.30
- Practice (choreography) 10.30-11.45
- Rest 11.45-12.15
- Dismissals 12-15-12-30

Parents need to provide nutrient healthy snacks and have their child wear comfortable sport clothes. (leotards, shorts, legging, t-shirt).



In order to enroll your child in the Camps, you need to fill and sign the following form and bring it back to Beatrice Ruggeri with the check for the payment written to **Beatrice Ruggeri**. No check will be deposited until few days before the camp but no space will be held without form and check received. *Spaces are limited to 12 student, first come first served.*

Child's name _____ **class** _____

Guardians name _____

email _____

phone _____

Half Day option \$ 120 _____
(check the option)

Emergency contact:

name _____ **phone** _____

email _____

• **Payment is nonrefundable and must be made in full for each session.**

WAIVER OF LIABILITY AND CONSENT TO MEDICAL ATTENTION

I approve of my child's participation in all class activities, with the understanding that such activities carry with them an inherent risk. I hereby agree that I hold Beatrice Ruggeri, St.Thomas More and any person(s) affiliated with the summer camp, harmless of any injury, loss, damage, and any and all liability regardless of circumstance while my child is in their care.

I further agree that in the event of an emergency I give permission for medical attention or treatment to be administered to my child by a qualified medical professional. I acknowledge that injuries deemed minor by any staff may be treated on site with first aid practices.

GUARDIAN SIGNATURE _____ **DATE** _____