

## EXTREME BGO SUMMER CAMP REGISTRATION 2026

**Ages:** 3–17 | **Contact:** (407) 869-8744 | info@brownsgym.com

**Staff:** USAG Certified | CPR, First Aid, & AED Trained (Infant, Child, & Adult).

**Activities:** Gymnastics, Ninja, Dance, Cheer & Karate Classes, Sports, Arts & Crafts.

### Special Pricing & Promotions

- **Early Registration:** Paid in Full by **April 27th, 2026. NO REFUNDS.** No Exceptions!
- **March Promo:** Pay in full by **March 31st** for 4+ weeks for Promo rates. **NO REFUNDS.**No Exceptions!
- **Discounts & Fees:** 10% Sibling Discount | \$45 Summer Camp Reg. Fee (Include: T-shirt)
- **Field trips:** Prices are not **included in the weekly fee.**

<i>Pre school 3-5 yrs old</i> <i>Full day: 9:30am-3:00pm</i>	<i>Recreational 6-17 yrs old</i> <i>Full day: 7:30 am-6:00pm</i>	<i>Recreational 6-17 yrs old</i> <i>AM-Half day: 7:30 am-12:30pm</i> <i>PM- Half day: 1:00 am-6:00pm</i>
<b>***Early Registration*** \$205</b>	<b>***Early Registration*** \$245</b>	<b>***Early Registration*** \$195</b>
<b>**PROMO** \$195</b>	<b>**PROMO** \$235</b>	<b>**PROMO** \$185</b>
5 DAYS \$225	5 DAYS \$265	5 DAYS \$205
4 DAYS \$205	4 DAYS \$245	4 DAYS \$185
3 DAYS \$185	3 DAYS \$225	3 DAYS \$175
2 DAYS \$155	2 DAYS \$175	2 DAYS \$135
1 DAY \$80	1 DAY \$90	1 DAY \$70

Initial: \_\_\_\_\_

## Terms & Policies

*Please initial each line to confirm you have read and accepted the policy.*

\_\_\_\_\_ **1. PAYMENTS:** Registration and 1st week due at signup. Auto-pay runs every Thursday prior to the reserved week. No checks. We accept all credit cards; a 3% processing fee applies to American Express transactions. Zelle: gs@brownsgym.com.

\_\_\_\_\_ **2. DECLINED CARDS & LATE FEES:** A \$10 fee applies for cards declined on Thursday. If payment is not received by 6:00 PM on Friday, a \$10 late fee will be added and the child cannot attend the following week.

\_\_\_\_\_ **3. LATE PICKUP:** \$1.00 per minute fee after 3:00 PM (Preschool) or 6:00 PM (Rec).

\_\_\_\_\_ **4. WALK-INS:** \$10.00 daily surcharge if not registered by 6:00 PM the day prior.

\_\_\_\_\_ **5. CANCELLATIONS:** 5-business day notice required to transfer weeks (3+ weeks only). **No refunds/credits for missed days.** If we are not notified one full week in advance, you will be charged for your reservation. **No exceptions.**

\_\_\_\_\_ **6. RESERVE:** If you reserve only two weeks of camp or less, payment for all reserved dates is due upon registration. No exceptions.

\_\_\_\_\_ **7. DRESS CODE:** Girls must wear a gymnastics leotard (**no two-pieces**). Boys must wear shorts and a T-shirt. No jeans, zippers, buckles, jewelry, or electronic devices. **Preschool kids must bring a change of clothes.**

\_\_\_\_\_ **8. FOOD & TRIPS:** Provide 2 snacks, lunch, and drinks daily. **Snack cards (\$10, \$20, \$30) available at reception. T-shirts are required for trips (included).**

\_\_\_\_\_ **9. CHECK-IN/OUT:** Mandatory sign-in/out at the desk. **Drive-thru (5:30-6:00 PM) at the back door requires a Car Rider Sign.**

\_\_\_\_\_ **10. SECURITY:** Authorized adults must show ID and provide the Code Word for pick-up.

**CODE WORD:** \_\_\_\_\_

### 11. WAIVERS:

\_\_\_\_\_ **MEMBERSHIP WAIVER:** I have read and signed the Membership waiver.

\_\_\_\_\_ **FIELD TRIP WAIVER:** I have read and signed the Field Trip waiver.

\_\_\_\_\_ **12. LIABILITY:** Parents must have medical insurance. Brown's Gym is not responsible for lost/stolen items or injuries.

**INSURANCE CO. / POLICY #:** \_\_\_\_\_

\_\_\_\_\_ **13. I have read and understand all the above policies.**

**SIGN ONLY!** Your cooperation concerning this procedure will help ensure the safety of your child! Brown's Gym Orbit Sports Academy is not responsible for personal items that are lost, stolen, or damaged. Parents are required to have medical insurance and will be responsible for medical expenses incurred at camp. I understand that participation in gymnastics and various sports activities involves motion, and as such carries a risk of injury.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Full Day Camp Daily Schedule

8:30-9:00	Arrival
9:00-9:15	Warm up
9:15-10:30	Gymnastics rotations
10:30-10:45	Snack
10:45-11:45	Games
11:45-12:15	Open gym
12:15-1:00	Lunch
1:00-3:00	Sports rotations
3:00-3:15	Snack
3:15-4:00	Craft time
4:00-5:00	Open Gym
5:00-5:30	Movie time and games
5:30-6:00	Pick up-car line at the back of the gym.

### Preschool Camp Daily Schedule

8:30-9:00	Arrival
9:05-9:15	Warm up
9:15-10:00	Preschool obstacle courses
10:00-10:15	Snack
10:15-11:00	Games
11:00-11:45	Preschool obstacle courses
11:45-12:15	Pit time,
12:15-1:00	Lunch
1:00-1:45	Craft
1:45-2:45	Sports rotations
2:45-3:00	Dismissal

The schedule changes depending on the week's theme. This is a sample schedule.

Initial: \_\_\_\_\_

**BROWN'S GYM ORBIT SPORTS ACADEMY**  
**"LEARNING THROUGH FUN"**  
**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND**  
**INDEMNITY AGREEMENT ("AGREEMENT")**

In consideration of participating in all activities including the Brown's Gym Orbit Sports Academy Summer Camp Program, 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 not known 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 a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue Brown's Gym Orbit Sports Academy, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and instructors 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 "releases" or otherwise, including negligent rescue operations and future agree 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 Releases, I will indemnify, save, and hold harmless each of the Releases 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 all 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.

\_\_\_\_\_  
**Print name of participant (s)**

\_\_\_\_\_  
**Signature of Parent/or Legal Guardian**

\_\_\_\_\_  
**Date**

**PHOTO PERMISSION**

I, \_\_\_\_\_, give permission to the **BROWN'S GYM ORBIT SPORTS ACADEMY** to take or use pictures, slides, digital images, or other reproductions of my minor child \_\_\_\_\_, and to put the finished pictures, slides, or images to use on business site, web, or other business social media or other printed or electronic materials related to marketing function of the Brown's Gym Orbit SA without compensation.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Alvarez and Sanchez LLC DBA Brown's Gym Orbit Sports Academy**

Gymnastics, Martial Arts, Karate, Dance, Cheer, Afterschool Program, Ninja, Open Gym, Birthday Parties & Camps.

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK; AND INDEMNITY AGREEMENT  
("AGREEMENT")**

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 or I am unable to safely perform any activity, I will immediately discontinue participation in the activity. I fully acknowledge, understand, appreciate and agree, 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 Releasees named below; and that there may be other risks either not known 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 a result of my participation in the activity. I further acknowledge, understand, appreciate, and agree that my participation may result in possible exposure to and illness from infectious diseases, including, but not limited to, MRSA, Influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees or others and assume full responsibility for my participation and exposure. I hereby release, discharge, and covenant not to sue your business, its administrators, directors, agents, officers, volunteers, employees, contractors, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of the premises on which the activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, 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 further agree 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, defend, and hold harmless each of the RELEASEES from any loss, liability, damage, or cost, which any may incur as the result of such a claim. I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, and I 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 all liability to the greatest extent allowed by law. I agree that if any portion of this Agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

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**Printed name of participant (s)**

PARENTAL CONSENT I, hereby covenant and promise that I am the minor's parent and/or legal guardian, and on behalf of myself and the minor, 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 further understand the risk of exposure to injury and/or infectious diseases, for myself and my child, as a participant, spectator at events, classes, or our presence at the facility. I hereby release, discharge, covenant not to sue and AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS each of the RELEASEES from all liability, claims, demands, losses or damages on the minor's or my account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including, but not limited to injury, negligent rescue operations, and/or exposure to infectious diseases and I further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above RELEASEES, I WILL DEFEND, INDEMNIFY, AND HOLD HARMLESS each of the RELEASEES from any litigation expenses, attorney fees, loss liability, damage, or cost which any RELEASEE may incur as the result of any such claim.

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**Printed Name of Parent/Legal Guardian**

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**Signature of Parent/Legal Guardian****Date:** \_\_\_\_\_

## EXTREME BGO SUMMER CAMP REGISTRATION 2026

### Child's Information

1<sup>ST</sup> Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Shirt

Size: \_\_\_\_\_

2<sup>ND</sup> Child: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Shirt

Size: \_\_\_\_\_

3<sup>RD</sup> Child: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ DOB \_\_\_/\_\_\_/\_\_\_ Shirt

Size: \_\_\_\_\_

### Parent/Legal Guardian's Information

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Mother's Cell #: \_\_\_\_\_ Father's Cell #: \_\_\_\_\_

Email: \_\_\_\_\_ Additional email: \_\_\_\_\_

Are there any medical conditions/allergies to which we should be alerted?

No                      Yes                      List \_\_\_\_\_

I understand that it is the intent of Brown's Gym Orbit Sports Academy to provide for the safety and protection of my child, therefore, if I am not available, I authorize Brown's and its employees to seek attention for my child and to execute orders to authorize emergency medical treatment which may be required.

\_\_\_\_\_  
*Signature of Parent/Legal Guardian*

\_\_\_\_\_  
*Date*

Adult Authorized to PICK UP /Emergency Contact. Code Work: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: \_\_\_\_\_

**Instructions:** Check **Full Day** or **Pre-K** and/or **Field trip (not included in weekly fee)**, for **Half Day**, write **AM** or **PM**. Please **initial at the bottom** of the page to confirm your registration.

Thrus, May 28th	_____ Full _____ Half _____ Pre-k	Fri, May 29th	_____ Full _____ Half _____ Pre-k
<b>Week 1:</b> Mon, June 1st _____ Full _____ Half _____ Pre-k Tue, June 2nd _____ Full _____ Half _____ Pre-k Wed, June 3rd _____ Full _____ Half _____ Pre-k Thur, June 4th _____ Full _____ Half _____ Pre-k Fri, June 5th _____ Full _____ Half _____ Pre-k Field Trip : Dave & Busters: _____		<b>Week 6:</b> Mon, July 6th _____ Full _____ Half _____ Pre-k Tue, July 7th _____ Full _____ Half _____ Pre-k Wed, July 8th _____ Full _____ Half _____ Pre-k Thur, July 9th _____ Full _____ Half _____ Pre-k Fri, July 10th _____ Full _____ Half _____ Pre-k Field Trip : Movie of the Month (Minios): _____	
<b>Week 2:</b> Mon, June 8th _____ Full _____ Half _____ Pre-k Tue, June 9th _____ Full _____ Half _____ Pre-k Wed, June 10th _____ Full _____ Half _____ Pre-k Thur, June 11th _____ Full _____ Half _____ Pre-k Fri, June 12th _____ Full _____ Half _____ Pre-k Field Trip : Chocolate kingdom: _____		<b>Week 7:</b> Mon, July 13th _____ Full _____ Half _____ Pre-k Tue, July 14th _____ Full _____ Half _____ Pre-k Wed, July 15th _____ Full _____ Half _____ Pre-k Thur, July 16th _____ Full _____ Half _____ Pre-k Fri, July 17th _____ Full _____ Half _____ Pre-k Field Trip : All fired up (Pottery): _____	
<b>Week 3:</b> Mon, June 15th _____ Full _____ Half _____ Pre-k Tue, June 16th _____ Full _____ Half _____ Pre-k Wed, June 17th _____ Full _____ Half _____ Pre-k Thur, June 18th _____ Full _____ Half _____ Pre-k Fri, June 19th _____ Full _____ Half _____ Pre-k Field Trip : Crayola Center: _____		<b>Week 8:</b> Mon, July 20th _____ Full _____ Half _____ Pre-k Tue, July 21st _____ Full _____ Half _____ Pre-k Wed, July 22nd _____ Full _____ Half _____ Pre-k Thur, July 23rd _____ Full _____ Half _____ Pre-k Fri, July 24th _____ Full _____ Half _____ Pre-k Field Trip : Sea Life Aquarium: _____	
<b>Week 4:</b> Mon, June 22nd _____ Full _____ Half _____ Pre-k Tue, June 23rd _____ Full _____ Half _____ Pre-k Wed, June 24th _____ Full _____ Half _____ Pre-k Thur, June 25th _____ Full _____ Half _____ Pre-k Fri, June 26th _____ Full _____ Half _____ Pre-k Field Trip : Science Center: _____		<b>Week 9:</b> Mon, July 27th _____ Full _____ Half _____ Pre-k Tue, July 28th _____ Full _____ Half _____ Pre-k Wed, July 29th _____ Full _____ Half _____ Pre-k Thur, July 30th _____ Full _____ Half _____ Pre-k Fri, July 31st _____ Full _____ Half _____ Pre-k Field Trip : Wonder Works or Museum of Ice: _____	
<b>Week 5:</b> Mon, June 29 _____ Full _____ Half _____ Pre-k Tue, June 30th _____ Full _____ Half _____ Pre-k Wed, July 1st _____ Full _____ Half _____ Pre-k Thur, July 2nd _____ Full _____ Half _____ Pre-k Fri, July 3rd _____ Full _____ Half _____ Pre-k Field Trip: Bowlero: _____		<b>Week 10</b> Mon, Aug 3rd _____ Full _____ Half _____ Pre-k Tue, Aug 4th _____ Full _____ Half _____ Pre-k Wed, Aug 5th _____ Full _____ Half _____ Pre-k Thur, Aug 6th _____ Full _____ Half _____ Pre-k Fri, Aug 7 th _____ Full _____ Half _____ Pre-k Field Trip : Movie of the Month (Moana): _____	

**Camp Registration Fees - \$45child - 10% sibling discount**

Initial: \_\_\_\_\_

## RECURRING WEEKLY CHARGE AUTHORIZATION

EFFECTIVE ON: \_\_\_\_\_

I fully understand the Brown's Gym Orbit Sports Academy Summer Camp Payment Policies which I am in receipt; therefore, I hereby authorize Brown's Gym Orbit Sports Academy DBA Alvarez & Sanchez LLC to charge my credit card weekly amount due each Thursday prior to the reserved week unless I have paid previously. Furthermore, I understand that **NO REFUNDS** and **NO CREDITS** will be given for missed days/weeks or cancellations. I have read and agree to comply with this policy.

### Cardholder Authorization

Child(ren) Name: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cardholder phone number: \_\_\_\_\_

Card Type: \_\_\_\_\_ Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Date: \_\_\_\_\_

Print Cardholder Name: \_\_\_\_\_

407-869-8744



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