GYMNASTICS HOLIDAY BOOKING APPLICATION 2024

Payment Details are required upon RETURN OF THIS booking application.

Please fax to 9846 1222 or Scan and Email to gymnastics@chrg.com.au. Payment details must be completed to confirm your booking.



Cancellation Policy:

Cancellation of all bookings must be made to Administration 7 days prior to the program commencing to be considered for refund.
In case of illness or injury where a doctors certificate can be provided, full refund will be given.
In all other cases we have a NO REFUND POLICY

Program Nomination Jan 15			th − 19 th			July 8 th – 12 ^t	th	Sept 30 th – C	Oct 4 th		
Participant's Details											
Surname											
First Names											
Address											
Suburb				Postco			Postcode	ode			
Date of Birth				Ag	e		Home Phor	ne			
Email Address											
Has your child attended any Program and completed an Enrolment Form since 2016 Yes No											
Program Booking Request											
What to Bring	;		All Programs: Children need to come dressed in sports wear, clothing that is not restrictive. Bring a pair of socks to use on the Big Trampolines. (essential for Trampoline) Full Day Program: Children will need to bring Swimmers, Towel and Lunch items only. All Programs provide Morning Tea and Afternoon Tea and Refreshments								
На	lf Day		Mon 🔲	Tu	es	W	Ved Thur]	Fri 🔲	
Full Day (Competent swimmers only)		only)	Mon 🔲	Tu	es	W	ed 🗆	Thur 🗖		Fri 🗆	
Time			Gymnastics Half Day Programs 9 to 12:30pm \$55.00/ 1/2 day			Full Day Programs 9am to 4pm \$75.00/day					
Payment Section: A Receipt and confirmation will be sent for your records. Payment Details											
Card Holder's Name	Cadifype Cadifype										
Credit Card No:	lo:						Expiry Date				
Child's Name	·					\$		CCV Security	CCV Security Number		
Signed (Parent /Guardian	rdian)				Dated						