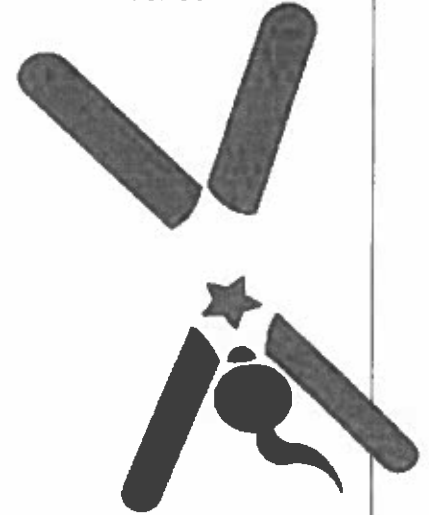




FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# PRE-TEAM GYMNASTIC

## ONEIDA YMCA



The primary objective of the Pre-Team Gymnastic program is to provide your child with the necessary foundation to perform competitive gymnastics. The main focus will be on developing strength, flexibility, and reinforcing the proper body positions to perform complex gymnastic skills. There are two core requirements in order to be considered for Pre-Team.

- The child **MUST** be able to do a vertical cartwheel.
- The child **MUST** be able to hold a bridge without assistance.

\* \* An evaluation by the Coach **MUST** be completed before you register your child for this program. Evaluations will take place on: \_\_\_\_\_.

Pre-Team is a 36 week program

Larissa Watts

Starting September 12, 2017

USA Certified Gymnastics Coach

Ending June 12, 2018

Members \$75 per month

Non-Members \$115 per month

When: Tuesday, September 12, 2017

Time: 4:00pm– 5:30pm

Location: Oneida YMCA

701 Seneca Street

Oneida, NY 13421

315-363-7788

[ymcatrivalley.org](http://ymcatrivalley.org)

Contact: Valarie Webb





FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

Payment Policy/Agreement

- 1) Payments will be drafted the first Monday of every month.
- 2) There will be an additional fee of \$20, charged to your account if your draft is declined for any reason.
- 3) If your account becomes delinquent you have 2 weeks to clear up your account. If it is not cleared up in this time your child will be discharged from the program.
- 4) A 30 day notice must be given if you choose to UN-enroll your child from the Pre-Team Program.
- 5) No credits or refunds will be issued unless the program is cancelled or an error is made in the billing process.

Draft Schedule

September 11<sup>th</sup>

October 2<sup>nd</sup>

November 6<sup>th</sup>

December 4<sup>th</sup>

January 1<sup>st</sup>

February 5<sup>th</sup>

March 5<sup>th</sup>

April 2<sup>nd</sup>

May 7<sup>th</sup>

June 4<sup>th</sup>

I authorize the YMCA the Great Tri-Valley to charge my account on the first Monday of each month in the amount of \$\_\_\_\_\_.

I understand that any returned or insufficient funds drafted will result in a \$20 fee.

\_\_\_\_\_  
Signature of Account Holder

\_\_\_\_\_  
Date