

Spring '10 Gymnastics & Tumbling

@ Memorial Drive Presbyterian Church

The Tumbling Co. invites your child and friends to participate in our fun, encouraging recreational Fall tumbling classes offered at MDPC.

Our goal is to encourage children through a success oriented, positive learning experience in a non-competitive, athletic setting. Instruction is provided in floor exercise and vaulting and on beam and simplified bars. All instruction is well supervised and age appropriate with the student's safety and enjoyment foremost in mind.

All tumbling classes are open to the general community.

Class Day: Mondays

Class Dates: Mondays, Jan 4th- May 10th & Sat May 15th Spring show (No class Mar 15th nor Apr 5th)

Tuition: \$207 for 18 classes; Includes a Saturday Spring Exhibition

Schedule:

(All ages and grades as of late Fall 2008; call for later birthdays)

2:30-3:15 Almost 3's - 4 yrs, 5 yrs - Kinder*

3:15-4:15 Elementary ages (separated by skill levels)

Floor Tumbling Only (no vault, beam or bars)

Especially geared for cheer style tumbling progressions (cart wheels, round offs, back hand springs, back tucks, etc)

4:15-5:15 Kinder -1st Grade , 2nd -5th grade*

**Class separated into age groups*

Escort from Yellow School and CDI available

To register: Return this info to the REACH office of MDPC. Their phone number is 713-490-9564

Their mailing address is

Memorial Drive Presbyterian Church - REACH Dept.

11612 Memorial Drive

Houston, TX 77027

----- please keep top portion -----

Child's Name _____ Date of Birth _____

Parent's Name _____ Home Phone _____

Address _____ Cell Phone _____

_____ Zip _____

Class Choice:

Mondays:

2:30 3:15 4:15

Food allergies:

Comments of physical problems or special needs:

I, the undersigned parent or guardian of the above student(s), hold the tumbling Company of Houston, its staff and the host organization harmless for any and all injuries (and related costs) my child may incur during the regularly scheduled Tumbling Co. activities.

If needed and in the event that I cannot be contacted, I hereby authorize medical treatment for the above student(s).

Signature

Date