

Brooklyn Gymnastics & Cheer

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Field Trip Agreement

Today's Date: _____

Date of Field Trip: _____ Time: _____ to _____

Length of Field Trip: (circle one) 1 hour 1.5 hours

How many guests are expected: _____ Ages of children attending: _____

Contact Name: _____

Address: _____ City/ST: _____ Zip: _____

Daytime Phone No: _____ Other Phone No: _____

Notes: _____

Policies I Agree to Adhere to:

My signature below signifies my agreement to these rules:

1. There will be NO adults on the equipment. Adults chaperoning will assist instructors as needed/directed.
2. Every participant must have a signed waiver to participate in the gym activities before the field trip begins.
3. Chaperones of the group are invited to take photos and videotape the field trip in the gym.
4. Field Trip deposits are non-refundable.
5. The field trip must be paid in full 1 week before the field trip begins

Signature

Date

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Office Use:

Contacted prior to Field Trip on (Date) _____

Field Trip Total Guest Count # _____ Waivers collected # _____

Cost of Trip: \$ _____

Deposit \$ _____ Date: _____ Type of Payment _____

Balance\$ _____ Date: _____ Type of Payment _____