

Offered Classes & Programs:

KidzCan I: 6 to 8 years old– (1 Hour 15 minutes)

Mon/Tue/Wed/Thur 5-6:15

Gymnastics instruction using all apparatus in a fun-filled and active environment. Challenges and games combined with basic gymnastics training.

KidzCan II: 9 to 14 years old (1 hour 30 min)

Mon/Tue/ Wed/Thur 6 - 7:30 pm

Recreational gymnastics class, fun games, challenges and basic as well as advanced gymnastics will be covered in this class.

Superoo: 7-9 years old (1 hour 30 min)

Mon/Tue/Wed/Thur 5- 6:30 pm

Pre-competitive class for Little Olympians. Physical and skill test required to be enrolled in this class. Skill oriented, developmental class.

Interclub Jr/Sr 8-14 years old (1 hour 45 min)

Mon/ Tue/Wed/ Thur 6-7:45 pm

Advanced recreational class. **Team Kitsilano members** - participants of this class will be able to participate in the gymnastics meets representing our gymnastics club.

GymStarz Junior (Interclub Performance Plus):

7- 9 years; Mon/Tue/Wed/Thur 5 – 7:30 pm (2 hour 30 min);

Pre-competitive class; 10 spots; 5 hours per week minimum training required.

Team Kitsilano members - participants of this class will be able to participate in the gymnastics meets representing our gymnastics club.

GymStarz Senior (Interclub Performance Plus):

10-15 years; Mon/Tue/Wed/Thur 5-7:30 pm;

Pre-competitive class; 10 spots; 5 hours per week minimum training required.

Team Kitsilano members - participants of this class will be able to participate in the gymnastics meets representing our gymnastics club.

Suggested Class Combinations: Mon/Thur, Mon/Wed, Tue/Thur.

Registration Fees

Fall 2018 Session: Sept 4th – Dec 21st

KidzCan 1

\$ 82.7 a Month – one class per week = 330.75/Season

\$ 148.85 a Month – two classes/week = 595.35/Season

Superoo and KidzCan 2

\$ 99.2 a Month – one class per week = 396.9/Season

\$ 187.4 a Month – two classes/week = 749.7/Season

Interlub

\$ 115.75 a Month – one class per week = 463/Season

\$ 209.3 a Month – two classes/week = 837.27/Season

GymStarz

\$ 154.35 a Month – 1 class per week = 617.4/Season

\$ 297.7 a Month – 2 classes per week = 1190.7/Season

Please note that every member will be required to pay **yearly** Gymnastics BC liability fee = 20 dollars.

As a registered business we are **required** to collect GST

Financial Assistance

We accept financial assistance from the following organizations:

1. JumpStart - jumpstart.canadiantire.ca
2. KidSport – www.kidsportcanada.ca

Please contact us for more details.

Registration/Refund Policies:

First week cancellation – full refund -10%

Second week cancellation – Refund -50 %

Third week cancellation – no refund



1936 W 10th Ave, Vancouver, BC V6J 2B2

Kitsilanogymnastics@live.ca; 604-349-8167

Kitsilanogymnastics.webs.com

twitter.com/kitsgymclub

Coaches:

Isabella Pavan - CIT, **Jessica Stephens** – CIT, **Mimi Hodgins** CIT, **Lia DeRaaf** – CIT; **Sergei Pirau** – Level 3 WAG&2 WAG; Trampoline lvl 1

Welcome to Kitsilano Gymnastics Club!

Do your kids like doing cartwheels and playing on the monkey bars? Would you like your child to become more flexible, stronger, and more agile in a fun and safe environment?

Program Details

WHO: _____

WHAT: _____

WHEN: _____

WHERE: 1936 W 10th Ave,
Vancouver, BC V6J 2B2

WHY: Fun, Physical Literacy, Gymnastics

COST: _____ See brochure

Program Contact Info:

Serghei Pirau

Kitsilano Gymnastics Club Head Coach

1936 W 10th Ave, Vancouver, BC V6J 2B2

Email: kitsilanogymnastics@live.ca

Phone: 604-349-8167

Kitsilano Gymnastics Inc provides safe, fun and developmentally appropriate gymnastic instruction and programs to Children and teen-agers. All of the participants will be introduced to all of the gymnastics apparatus and learn the basic and advanced skills. Our coaches will ensure a safe and fun learning environment and at the same time offer a variety of exercises and gymnastic elements to suit every child's fitness level.



REGISTRATION FORM

Child's name: _____

Age: _____ Grade: _____ Gender: _____

Parent/Guardian Information: Name: _____

Phone #: _____ Email: _____

Emergency Contact (Name): _____ Relationship: _____
Phone#: _____

Please list medical history/conditions...

Does your child have allergies? Yes___ No___

If YES, list _____

Does your child have anaphylaxis? Yes___ No___

If YES, list _____

Does your child have an EPI PEN? Yes___ No___

Does your child take medication Yes___ No___

If YES, list _____

Family Doctor: _____

Care Card #: _____

Payment Information:

Payment Type & Amount: Cash_____ Cheque_____ Cheques Payable
to: Kitsilano Gymnastics Incorporated

WAIVER

I hereby authorize my child's participation in this program. I know of no mental or physical issues, which may affect participation in this program.

Signature of Parent/ Guardian: _____

Date Signed (dd/mm/yyyy): _____