

TIME

2:30 pm \_ 3:45 pm

3:45 pm - 4:00 pm

**AGES** 6 and up

HOURS

**Full Day** 

**TENNIS** 

**DISSMISSAL** 

REQUIREMENTS

**Rhythmic Gymnastics** experience is necessary

9:00 am - 4:00 pm

JUNE 26TH - SEPTEMBER 1ST

## Minimum registration 6 weeks

6.26 - 6.30 WEEK 6 WEEK 1 7.31 - 8.04 7.03 - 7.07 WEEK 7 WEEK 2 8.07 - 8.11 WEEK 3 WEEK 8 7.10 - 7.14 8.14 - 8.18 7.17 - 7.21 WEEK 9 WEEK 4 8.21 - 8.25

7.24 - 7.28 WEEK 10 WEEK 5 8.28 - 9.01

## **MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY** 9:00 am \_ 9:15 am **ARRIVAL ARRIVAL ARRIVAL** ARRIVAL ARRIVAL 9:15 am \_ 9:30 am INDOOR WARM UP **INDOOR WARM UP** INDOOR WARM UP **INDOOR WARM UP INDOOR WARM UP** 9:30 am \_ 11:30 am **1ST PRACTICE 1ST PRACTICE 1ST PRACTICE 1ST PRACTICE 1ST PRACTICE** 11:30 am \_ 12:00 pm LUNCH LUNCH LUNCH LUNCH LUNCH 12:00 pm \_ 2:00 pm 2ND PRACTICE 2ND PRACTICE **2ND PRACTICE** 2ND PRACTICE **2ND PRACTICE** 2:00 pm \_ 2:30 pm **SNACK SNACK SNACK** SNACK **SNACK**

**3RD PRACTICE** 

**DISSMISSAL** 

MatchPoint NYC reserves the right to change specific activities without notice Includes activities on our multi-sport outdoor field

FREE TIME/ OUTSIDE GAMES

**DISSMISSAL** 

MatchPoint NYC • 2350 E 69th Street, Brooklyn, NY 11234 • T: (718) 444-3600

FREE TIME/ OUTSIDE GAMES

**DISSMISSAL** 

**TENNIS** 

DISSMISSAL

www.isadorarhythmics.com

## Rhythmic Gymnastics • Summer Program 2023

PARTICIPANT I	NFORMATION					
First Name		Last Name		Date of Birth	Male/Female	Age
Parent/Guardian	H	Iome Phone	Cell Phone	Email		
Address			City	State	Zip C	ode
☐ Check if you	r child has special need	ls. Explain				
•	pated in a MPNYC <i>Mill</i> .		before? ☐ No ☐	Yes – Program(s	)	
PROGRAM INFO						
June 26 – Sep	t 1, 2023 (ten weeks	s)	Т	his is a <b>FULL DA</b>	Y PROGRAM: 9	:00 - 4:00
					Drop-off time: 8	
					Pick -up time: 3	:45 - 4:00
	RHYT	MIC GYMN	ASTICS PROGE	RAM ACTIVITIE	<u>:S</u> :	
:	** warm-ups, 2-3 gyn	nnastics pract	ices daily, tenni	s. activities on o	utdoor field **	
	** includes <b>healt</b>	=	<del>-</del>			
k	** MatchPoint NYC re	serves the rig	ht to change spe	ecific activities wi	thout notice **	
Disco	ount available until	May 14th -	– 10% off with	n payment in fu	ıll or 50% depo	sit
	Total Weeks	Regular Pr	ice (per week)	10% off (pe	r week)	
	8 – 10		per week	\$530 per		
	6 – 7	\$610	per week	\$550 per	week	
	1-5	\$650	per week	\$585 per	week	
					_	
Participants in Fall and Spring		6.26	- 6.30 <b>WEEK 1</b>	7.31 -	8.04 <b>WEEK 6</b>	$\supset$
Isadora Rhythmics by MatchPoint		7.03	- 7.07 <b>WEEK 2</b>	8.07 -	8.11 <b>WEEK 7</b>	
NYC must participate in Summer		7.10	- 7.14 <b>WEEK 3</b>	8.14 -	8.18 <b>WEEK 8</b>	
Program <b>minimum 6 weeks</b> in		7.17	- 7.21 <b>WEEK 4</b>	8.21 -	8.25 <b>WEEK 9</b>	
order to advance in Level		7.24	- 7.28 <b>WEEK 5</b>	8.28 -	9.01 <b>WEEK 10</b>	
		7		_		_
PAYMENT TERM						
	n deposit. Balance d ration, balance will b					f not paid
	non-refundable after Ju				<del>_</del>	n program.
OTHER INFORM			•			
	if different from Parent / Guard					
	Ph				<del> </del>	<del></del>
·	dividual, other than the Parent/0		•			
PAYMENT INFO	Ph DRMATION	orie Number		Relationship to Child		
			□ CRED	IT applied in the a	mount of \$	
☐ Cash Payment in	n the amount of \$		TOTAL CHARGE	\$	BALANCE \$	
Check Payment i	in the amount of \$	payable to N	latchPoint Group 2		staff initials	s: [
	ne credit card specified below			redit Card must be on fil	e if payment not in full a	it registration
	Visa ☐ Amex ☐ Disc					
ACCEPTANCE						
By completing and	signing this registration for	m:				

I understand that I am entering into an enforceable financial agreement and I agree to all terms specified above; I affirm that I am the parent or legal guardian of the participant named herein and I agree that both parent/guardian and participant will abide by all MatchPoint NYC *Mill Basin* rules and regulations; If paying by credit card, I explicitly authorize MatchPoint NYC *Mill Basin* to charge my credit card; I understand that no refunds, make-ups, or credits will be given for absences or withdrawals once program begins; I have read and signed the waiver on the reverse side of this form, I understand it, and I agree to it in full.

Participant's Name Guardian's Name Guardian's Signature Date