

SWITCHING CLASSES

Instructors will continually evaluate the children and let you know if another day, time or level is more appropriate. You may switch classes at any time based on availability.

TUMBLING 7-16 Yrs 50 min.

Beg: Wed 5:10

Int: Mon 6:10, Tues 5:10, Wed 6:10, Thu 6:10

Backhandspring Class: Tue 6:10

CHEER 50 Min.

Cheer (6-12 yrs): Tues 5:10

ADVANCED 90 min.

GROUPED BY ABILITY!

\$525 for the session

Adv 1 & 2: Wed 2:50-4:20, 5:10-6:40

Thu 2:50-4:20, 5:10-6:40

Sat 12:00-1:30

HOLIDAYS

You may schedule a make-up for:

MLK Day

NOT INCLUDED IN SESSION:

Atlanta City Schools' Spring Break.

Holiday camps will be offered!!



BUCKHEAD/ SANDY SPRINGS Winter/Spring 2012

If class times do not work for your schedule...get 3 friends together and make your own time!

Additional Locations:

East Cobb 770-977-5557

Roswell 770-640-6605

School Programs 404-257-9912

Call for FREE TRIAL

404-841-6363

3872 Roswell Rd. #4

Atlanta, GA 30342

www.PeachtreeGymnastics.com
peachtreegymnasticsbuckhead@gmail.com

WINTER/SPRING 2012

Jan 2nd-May 26th

plus \$35 registration fee for all new students

30 day notice to cancel, refund for remainder

Prices pro-rated for late entry!

PAYMENT PLANS

Call us if you would like to set up a payment plan. If you leave a credit card # on file, \$5 extra per payment. If you wish to call in your payments or send check/cash, \$10 extra per payment. A \$25 late fee will be added to your account on the 5th if we have not received a payment. There is also a \$25 fee for all returned checks.

GYMNASTICS 22 Mths-12 Yrs

22-35 Months: Tumble Cubs

(Parent Participation) 40 min.

Mon 11:10 Fri 9:30

Tue 10:20 Sat 9:30

Wed 10:20

3-4 Year Olds: Bouncing Bears

(Grouped by age & ability) 40 min.

Mon 1:20, 3:10

Tue 11:10, 5:10

Wed 11:10, 1:20

Fri 10:20

Sat 10:20

4 1/2-12 Year Olds: Basic-Intermediate

(Grouped by age & ability) 50 min.

Boys & girls' classes split upon request!

Mon 2:10, 3:10, 4:10, 5:10

Tue 1:20, 4:10

Wed 3:10, 4:10

Thu 1:20, 4:10, 5:10

Sat 11:10

LOCATION

Our Buckhead facility is located at 3872 Roswell Rd. in the Buckhead Court Shopping Center, 4 doors down from Outback Steakhouse. We are 1 mile north of the Roswell & Peachtree Rd. merge. **404-841-6363.**

SATELLITE LOCATIONS

We offer gymnastics, cheer & hip hop instruction at the following schools: E. Rivers, Jackson, Morningside & Sarah Smith Elementary and Peachtree Road Methodist. Please check with the school for further information. We have facilities in: East Cobb 770-977-5557 and Roswell 770-640-6605. We offer gymnastics, dance, cheer, tumbling, sports skills and karate.

REFUND POLICY/REG. FEE

We offer money back guarantees unlike our competitors. If you are not satisfied in the first 2 weeks of classes, you may receive a FULL refund for classes. Please note the registration fee is non-refundable. After that period, we simply ask for a 30 day written notice and we will refund the amount for the remainder of the classes after the 30 days. Registration fee is paid at the time you register and due every Fall Session.

DISCOUNTS

50% off 3rd & 4th child
25% off 2nd class (Children taking 2 classes)

BIRTHDAY PARTIES

Our birthday parties are designed for ages turning 3-10 years old. The first hour of the party consists of gymnastics, cheer if requested and games. The next thirty minutes consists of cake and ice cream. Parents provide cake, ice cream, paper goods, table cloths, & refreshments.

8x1 Student/Teacher Ratio
10-15 children \$210
15-20 children \$280
20-25 children \$350

Available on Saturdays 2-3:30 & 4-5:30 and
Sundays 1:00-2:30 & 3:00-4:30.

A \$50 non-refundable deposit is due when scheduled.



*BUCKHEAD/
SANDY SPRINGS
Winter/Spring 2012*

Please mail forms & checks to: Peachtree Gymnastics, 3872 Roswell Rd. #4 Atlanta, GA 30342 Info: 404-841-6363

TOTAL AMOUNT DUE _____ PR Week: _____ AMOUNT ENCLOSED / AUTH TO CHARGE AT THIS TIME _____

CLASS TITLE _____ DAY/TIME _____ CIRCLE: Fall or Winter/Spring or Summer or Entire School Yr _____

CHILD'S NAME _____ GENDER _____ BIRTHDATE _____ AGE _____

ADDRESS _____ CITY _____ ZIP _____

PARENT'S NAME _____ PHONE # _____ CELL # _____

CIRCLE: Current student, Former student or New T-SHIRT (Optional \$10, Add to total cost) SIZE: (2-4), (6-8), (10-12), (14-16), AS, AM

VISA OR MC # _____ SECURITY CODE _____ EXP DATE _____

In an event of an emergency involving my child, and if Peachtree Gymnastics cannot get in touch with me, I hereby authorize any needed emergency medical care. I further agree to be fully responsible for all medical expenses incurred during the treatment of my child.

Signature of Parent or Guardian _____ E-mail Address (IMPORTANT) _____