

PARRY'S GYMNASTICS

Class Schedule September 1, 2022 - August 31, 2023

BALDWINSVILLE LOCATION

GROUP / LEVEL	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
BEGINNER AGE 6 & UP	6:00-7:00 PM	6:00-7:00 PM		6:00-7:00 PM	
INTERMEDIATE	4:30-6:00 PM	4:30-6:00 PM			
TEAM		4:00-7:00 PM	4:00-7:00 PM	4:00-7:00 PM	4:00-7:00 PM
OPEN GYM					6:00-7:00 PM



This is a **general practice session** not an instructed class. An instructor will supervise open gym as participants practice skills and routines learned in weekly classes. No skills may be practiced which have not already been worked on in your weekly class sessions or cleared by the instructor. **Cost: \$20 per week, paid at the door.** *Baldwinsville Location only.*

HAMILTON LOCATION

GROUP/LEVEL	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
BEGINNER AGE 6 & UP	5:30-6:30 PM		5:30-6:30 PM	
INTERMEDIATE		5:30-7:00 PM		5:30-7:00 PM
TEAM		3:30-5:30 PM	3:30-5:30 PM	3:30-5:30 PM

GENERAL INFORMATION FOR BOTH LOCATIONS



CALL FOR PRIVATE OR SEMI-PRIVATE LESSONS

PARRY'S GYMNASTICS

1694 Private Drive, Hamilton, NY 13346

Phone: (315) 383-0707 Email: gm33@twcny.rr.com

Website: www.ParrysGymnastics.com

**AGES 4 & 5
CALL FOR DAY
& TIME**

REGISTRATION INSTRUCTIONS: **Circle the times above which you plan to attend.** Return this form with the **RELEASE FORM** (available on our website) and **\$50 annual registration fee and tuition for your first month.** Tuition is calculated by multiplying the weekly tuition rate by the number of scheduled classes in a given month (see PARRY'S GYMNASTICS - CLASS CALENDAR for rates). **MISSED CLASSES DO NOT RECEIVE A TUITION REDUCTION, CREDIT OR REFUND.** Make-Ups may be requested. Any class with only one or two participants will meet for a half hour and be charged as Private or Semi-Private lessons at \$30 per half hour. Tuition is payable monthly on the **20th of each month in advance** for the month you are about to attend. Please use a **Payment Slip** (available at the front desk). Indicate name and exactly what you are paying for on the slip.

NAME: _____ AGE: _____ CELL: _____

ADDRESS: _____ ZIP: _____

EMAIL: _____ START DATE: _____