

SPRING 2024 SCHEDULE

GYMTIME PLACE
SCARSDALE CONGREGATIONAL CHURCH
1 Heathcote Rd. Scarsdale, NY 10583

MONDAY & THURSDAY

WEDNESDAY & FRIDAY

GROUP 1

9:30-10:15am FIRST STEPS / RUNNERS (13-48 mths)

GROUP 2

9:30-10:15am FIRST STEPS / RUNNERS (13-48 mths)

Super Soccerstars

GROUP 3

10:30-11:20am (13-36 mths) MONDAY OR THURSDAY

GROUP 4

10:30-11:15am FIRST STEPS / RUNNERS (13-48 mths)

MONDAY, WEDNESDAY, THURSDAY, & FRIDAY

GROUP 5 11:30-12:15pm HELLO WORLD (3-13 mths)

SPRING 2024:

APRIL 1ST, MON – JUNE 19th, WED

CLOSED: 4/29-5/3 (MON-FRI), 5/17 (FRI),
5/27 (MON) AND 6/6-7 (THUR&FRI)

- Schedule is subject to change
- Weather closures are based on Scarsdale School District closings

Emily's Gymtime Place Waiver/ COIVD Policy- please read and affirm in the registration section below and the back page

I hereby represent to Emily's GymTime Place, LLC, its affiliates, shareholders, partners, officers, agents, servants, employees and representatives (collectively "GymTime"), that I (my child) am (is) in good physical condition and am able to safely participate in GymTime's fitness and sports programs. I acknowledge that GymTime urges every participant to have a medical check-up before participating in any of GymTime's programs. I appreciate the danger of physical stress, strain, or injury and assume whatever risk is involved as a result of my (my child's) use of the facilities, equipment or services of GymTime.

I hereby release and hold GymTime harmless from and against any and all claims, liability, loss, damage, or injury sustained or incurred in connection with my (my child's) use of the facilities, equipment or services of GymTime, and waive any and all claims against GymTime for any damages or liability resulting from or in connection with such use, except for such damages which may be caused by GymTime's negligence.

This release, waiver and consent shall be binding upon me and my heirs, legal representatives and assigns.

Parents Name(s)		Address	S		City			
el. #	_ COVID POLICY	& Waiver Agreement (Signature)		Date	Email			
ES□ NO□ - I give my pe	rmission for Emily	y's Gymtime Place, LLO	C to use my chil	dren's name, photo for mark	eting and advertising pu	ırposes.		
Child's Name	Date of Birth	Date of Birth Select Group					Cos	
)		Group(1)\$485	(2) \$485	_(3)MON \$300 _(3)TH	UR \$270(4) \$485	(5) \$485		
		Group(1)\$485	_(2) \$485	(3)MON \$300(3)TH	UR \$270(4) \$485	(5) \$485		
ayment: Check (enclosed)		□ MasterCard	□ Visa	□ American Expre	ss	Total:		
rd Number			Cardhold	er Name				
Iling Zip Code	Expiration Date	c.V.C	: (three digit co	de) Signati	ıre			



2024 GYMTIME PLACE COVID POLICY

Emily's Gymtime Place COVID Policy - Please read and affirm in the registration section on the front

Release of Communicable Diseases including COVID-19* In consideration of being able to participate in Emily's GymTime Place, LLC. (collectively "GymTime") events and activities, the undersigned acknowledges, appreciates and agree that:

- 1. Participation includes possible exposure to and illness from infectious diseases, including, but not limited to influenza and COVID-19. While particular rules and personal discipline may reduce such chances, the risk of infection does exist, and, accordingly,
- 2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of GymTime, and assume full responsibility for myself or my child/ward's participation during class or at an event and,
- 3. I or my child/ward willingly agree to comply with the stated and customary terms and conditions for participation as regard protection against infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself and/or my child/ward from participation, and bring such to the attention of the nearest staff member immediately, or as soon thereafter as is practicable, and,
- 4. I, for myself and on behalf of my family, HEREBY RELEASE AND HOLD HARMLESS, GymTime, its staff, employees, officials, agents, agencies, sponsors, advertisers and, if applicable, owners and lessor of GymTime locations with respect to any illness, disability, death or loss or damage to person or property whether arising from the negligence of releases or otherwise, to the extent permitted by law.
- 5. We, the undersigned parent(s) acknowledge our decision to not have participant, vaccinated and assume all responsibilities for any issues connected to COVID-19 for him/her as well as any other child, staff, and parents.