

Orlando Metro Gymnastics Avalon Park

14180 East Colonial Drive, Orlando, FL 32826
(407) 201-4110 www.orlandometrogyms.com

2026 Summer In House Field Trip Registration

*Initial	Dates:		Begin:	End:	Cost:	Includes:
	Fri., May 29th	Tye-Dye	1:00pm	2:30pm	\$15.00	Design your own t- shirt
	Fri., June 5th	Canvas Painting	1:30pm	2:30pm	\$15.00	Paint your own canvas
	Fri., June 12th	Slime Time	1:00pm	3:00pm	12.00	Create your own slime
	Fri., June 19th	Ceramic Painting	1:00pm	3:00pm	\$15.00	Pick your design and paint it
	Fri., June 26th	Carnival	1:30pm	2:30pm	\$12.00	Play carnival games and win prizes
	Fri., July 3rd	4th of July Cookout / Water Day	12:00pm	2:00pm	\$12.00	Hot dog, chips & root beer floats
	Fri., July 10th	Soap Creations	1:30pm	2:30pm	\$12.00	Create and design your own soap bar
	Fri., July 17th	Mad Science- Dino Dig	1:00pm	3:00pm	\$20.00	Hands on experiment and take home project
	Fri., July 24th	Aqua Puff	1:30pm	2:30pm	\$12.00	Create the art and watch it grow
	Fri., July 31st	Ice Cream/ Water Day	12:30pm	2:30pm	\$12.00	Tons of water games and ice cream sundaes
	Fri., August 7th	Orlando Metro Games	10:00am	3:00pm	\$0.00	Team games and prizes

1st Child's Name: _____ Age _____ DOB _____ M/F

2nd Child's Name: _____ Age _____ DOB _____ M/F

3rd Child's Name: _____ Age _____ DOB _____ M/F

Emergency Contact: _____ Telephone#: (____) _____ - _____ Allergies: _____

Initial Each Policy:

_____ I understand my child must be at the gym at least 45 minutes prior to time listed above otherwise child may miss the trip and I will not be refunded/credited.

_____ All field trips must be paid for upon registration to reserve spot. Space is limited.

_____ **Field trips are on a first come basis. No refunds/credits will be given for missed and/or cancelled field trips regardless of illness/injury/camp attendance.**

I give permission for my child(ren) to participate in all of the above field trips as I have selected and paid for in advance. I understand the fees are non-refundable and non-transferable.

_____ Print Parent/Guardian Name

_____ Signature Parent/Guardian

_____ Date