

## **TEEN SUMMER CAMP 2025**

Name	Age	Date of Birth	-
Street Address	City	StateZip	_
Home Phone	Rower's cell ph	none	_
Rower's email	Parent's Name	es	_
Mother's Cell	Father's Cell _		_
Mother's email	Father's email		_
School name	Grade		
(using indoor rowing machines, con Camp Schedule Monday-Friday  Time: 10:00am-2:00pm Fees: \$500.00 per week	nditioning, and core strengthening) June 23-June 27 July 7-July 11 July 21-July 25	).	
physical exercise. Yes/No		al condition that might affect him/her durin	g
I give permission for my child to p	articipate in the GMS Rowing Prog	gram	
Signature:			
What to wear/bring: Tight	fitting clothing, sneakers & socks,	lunch in a cooler, non-disposable water bot	ttle

sunscreen, change of clothing, towel, rain jacket, hat and/or sunglasses.

**PAYMENT (Check or Cash)** - This is nonrefundable once the program starts. Payable to GMS Rowing Center.

Mailing Address PO Box 1647 New Milford, CT 06776

Boathouse 172 Grove St., New Milford, CT 06776 860-350-4004

www.gmsrow.com