



A FUN PLACE FOR OUR COMMUNITY TO OPENLY AND SAFELY CELEBRATE GYMNASTICS.

3 STRIKE POLICY

I understand and agree to the 3 Strike Policy

Parent Signature: _____

Date: _____

Parent Director Signature: _____

Strike: _____ Date: _____ Task: _____

Parent Initials: _____ Reason: _____

Strike: _____ Date: _____ Task: _____

Parent Initials: _____ Reason: _____

Strike: _____ Date: _____ Task: _____

Parent Initials: _____ Reason: _____

Board decision: _____

Date: _____ Parent Director Signature: _____