



# EVOLUTION TRAINING CENTER in BRIDGEWATER

## Specializing in cheerleading and tumble

**Evolution Training Center is located right on Milltown Road!!**

We are very excited to offer the Bridgewater Recreation community the opportunity to try the sport in a non-competitive way to get some fitness and fun activity to our kids and teens, or even move them to a team program. In our newly re-modeled, safe and specialized facility, students of all ages and levels learn everything from the basic skills (rolls, handstands, cartwheels) to the more advanced skills (walkovers, handsprings, layouts). Then there are advanced tumble classes for those who have already mastered back handsprings and/or round-off back handsprings. USASF certified instructors work with the children to progress as they want to progress. We strongly believe that the children are here to learn lifelong fitness, teamwork and good sportsmanship, increase skill levels in both cheerleading and tumbling, build self-esteem and confidence, and most of all, to have fun while doing something they enjoy. And that's what it's all about.

Evolution has programs for the littlest ones with Preschool Tumble (3-5) and Intro to Tumble (4-6). These are designed to be an outlet for the youngest athletes to get their start with fitness and tumble basics. We use our specialized equipment, themes, props, and music to create a progressive, exciting and stimulating environment children totally enjoy. We teach young athletes to be self-confident, do their best and mostly to Have Fun!

Our Beginner and USASF level programs continue right through to age eighteen, giving children the opportunity to train in classes that not only teach them the fundamentals of tumbling and cheerleading but also help them learn balance, flexibility, strength, coordination, focus and the all-important - teamwork. As the Bridgewater-Raritan training center for sideline and competition cheer and tumbling, children who are ready to join the Bridgewater or All-Star leagues will have the confidence and training to be the Best of the Best. Our programs will put them right where they want to be.



**Special discounted pricing for Bridgewater residents enrolled through the Bridgewater Recreation program.** Open-enrollment. In-person evaluation for USASF level programs. Checks payable to Evolution & sent to Bridgewater Recreation, 100 Commons Way, Bridgewater, NJ 08807.

**EVOLUTION TUMBLING AND CHEERLEADING—8-classes at level (must be completed within the session)**

Winter Session: January through March      Spring Session: April through June      Summer Session: July-August  
**All Programs - \*\*\$136**

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Last Name	First Name	Birth Date/Age	Gender
Mailing Address		Town	Zip
Home Phone #	Cell #	Work #	

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Email Address (required)

If the participant has individualized needs due to a disability, please check the following and someone will contact you regarding reasonable accommodations.  Yes, I will need to be notified regarding special considerations for my child.

Injuries may occur. Please note that the Bridgewater Recreation Department does not provide individual medical insurance coverage for its participants. Each participant will be covered under his/her family medical policy. It is recommended that participants have insurance before participation. The Recreation department reserves the right to cancel, alter, supplement, limit registration or change any other information. No refunds (of course, special medical issues considered). Non-transferable. Evolution Training Center requires the attached Medical Release to be filled out and turned in at the front desk on the first day of class. **\*\*Special rate limited to one session per child. No makeups, no session extensions.**

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Parent/Guardian Signature	Date
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# Fall 2015 – Summer 2016 - Tumble Schedule



Evolution Training Center, LLC  
360 Milltown Road, Bridgewater, NJ 08807 908-450-0384  
[www.TheEvolutionGym.com](http://www.TheEvolutionGym.com)

**Begins September 1<sup>st</sup> 2015 and Ends August 28<sup>th</sup> 2016**

Closed: Labor Day September 4<sup>th</sup>- 7<sup>th</sup>, Halloween October 31<sup>st</sup>, Thanksgiving November 26<sup>th</sup>- 29<sup>th</sup>,  
Winter Break December 24<sup>th</sup>- Jan 3<sup>rd</sup>, Spring Break March 21<sup>st</sup>-27<sup>th</sup>, Memorial Day May 27<sup>th</sup>- 30<sup>th</sup>, 4<sup>th</sup> of July-July 2<sup>nd</sup>- 4<sup>th</sup>

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	Saturday
9:00 AM						Intro to Tumble Beginner Tumbling (Ages 8 & under) USASF1
10:00 AM						Beginner (Ages 9 & over) USASF 1
						Beginner Tumble
12:00 PM						Learn to Cheer Open Gym (90)
4:00 PM	USASF 1	Intro to tumble		Pre School		
4:30 PM			Open Gym (90)			
5:00 PM	Beginner Tumbling (Ages 8 & under) Beginner Tumbling (Ages 9 & up) USASF 2	USASF 1 (90) USASF 1A (90) Preschool		Intro to tumble	Beginner Tumble (8 & under) Beginner Tumbling (Ages 9 & up) USASF 1 (90) USASF 2 (90) USASF 3 (90)	
6:00 PM		Learn to Cheer USASF 3 (90)		USASF 1 USASF 1A (90) USASF 2 (90)	USASF 1 Flight School	
6:30 PM		USASF 2 (90)	USASF 1			
7:30 PM		USASF 4 (90)	USASF 3 (90) USASF 5 (90)	USASF 3 (90) Beginner Tumbling (Ages 9 & up)		
8:00 PM	USASF 1/1A USASF 2	USASF 1				

Evolution Training Center, LLC is a member of the United States All-Star Federation (USASF.NET) and follows the USASF tumbling guidelines.

## Class Descriptions:

**Pre-School:** For ages 3-5, still surrounded by all the FUN of music and games, the emphasis shifts to basic skills and body positions -tuck, straddle, forward/backward, cartwheels, handstands- and incorporating balance, strength and coordination activities.

**Intro to Tumble:** For ages 4-6, some children advance very quickly through the basic skills, but are not quite age-ready for the Beginner level. This focus is on introducing more advanced skills and offers the opportunity to join our cheer and tumble exhibition team to show off their stuff!

**Beginner Tumbling:** Basic tumbling skills are the focus – forward & backward rolls, handstands, cartwheels, power hurdle & running 2 step round-offs.

**USASF 1:** Progression continues with standing back handspring and round-off back handsprings – minimum requirement is a proficient power hurdle & running 2 step round-off.

**USASF 1 Advanced:** Progression continues with round off multiple back handsprings and standing multiple back handsprings – minimum requirement is a proficient round off back handspring or a standing back handspring

**USASF 2:** Progression continues with round-off back handspring back tuck and jump to standing back handspring – minimum requirement is a proficient, independent multiple back handspring pass.

**USASF 3:** Progression continues with combination passes to layout, x-outs, standing back handspring back tuck – minimum requirement is a proficient independent round-off back handspring back tuck.

**USASF 4:** Progression continues with twisting skills leading up to full and double full layouts – minimum requirement is a proficient independent round-off back handspring layout.

**USASF 5:** Progression continues with combination passes to full and double, standing full – minimum requirement is a proficient independent round-off back handspring full and jump to standing tuck

# Evolution Training Center, LLC.

## **Medical Treatment Authorization and Liability Release**

360 Milltown Road, Bridgewater, NJ 08807 1-908-450-0384 www.TheEvolutionGym.com

I, the undersigned parent or guardian, do hereby grant permission for my daughter/son, \_\_\_\_\_, to participate in the activity of cheerleading and tumbling gymnastics at the Evolution Training Center, LLC. (ETC). In order that my daughter/son may receive the necessary medical treatment in the event she/he may sustain injury or illness during participation in this activity, I hereby authorize the cheerleading coach or other supervisor obtain medical treatment for my daughter/son for such an injury or illness during the activity, and exercise of authority.

I understand that this activity involves risk to the participant, I further acknowledge and understand that due to the nature of this activity, which involves inversion and rotation of the body, there is a possibility that my daughter/son may sustain physical illness or injury, minimal, serious, or catastrophic), in connection with her or his participation. I further acknowledge and understand that my daughter/son is assuming the risk of such illness or injury through her/his participation, and I further release Evolution Training Center, LLC., and its staff, agents, employees and it's representatives from any claims for personal illness or injury that my daughter/son may sustain during participation in this activity.

I further understand that Evolution Training Center, LLC. has established rules and regulations pertaining to conduct, behavior and activities of all students and cheerleading participants, by which my daughter/son must abide during participation in this activity, and that my daughter/son and I will be responsible for her/his failure to abide by those rules and regulations.

I further grant permission to the Evolution Training Center, LLC. to photograph my daughter/son during the aforementioned activities for use in publications and advertisements to promote Evolution Training Center, LLC. and affiliated companies.

**ACTIVITY DESCRIPTION: CHEERLEADING AND TUMBLING ATHLETICS including but not limited to tumbling, stunting, jumping, cheerleading, dancing, conditioning and related exercises/ physical activities. Instruction can be done in a camp, clinic, class or team practice setting. This authorization also releases ETC along with any school facility that may be rented for the annual cheerleading competition.**

*This form must be kept current and it is the participant's parent or guardian responsibility to notify ETC in writing, with any proposed changes.*

Participants Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parents' Names: Mother \_\_\_\_\_ Work # \_\_\_\_\_

Father \_\_\_\_\_ Work # \_\_\_\_\_

Parent E-Mail Addresses: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Student E-mail Address: \_\_\_\_\_

Please List any Custody Restrictions: \_\_\_\_\_

### **MEDICAL INFORMATION**

My daughter/son is in good physical condition and currently is under no restrictions with regard to physical activity. If my child is in need of Medical attention, and I can not be reached immediately, I grant permission for my child to receive the necessary medical attention.

EXISTING MEDICAL CONDITION(S): \_\_\_\_\_

MEDICATION(S): \_\_\_\_\_ ALLERGIES \_\_\_\_\_

MEDICAL INSURANCE COMPANY: \_\_\_\_\_ POLICY #: \_\_\_\_\_

DOCTOR'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ PREFERRED HOSPITAL: \_\_\_\_\_

EMERGENCY CONTACT NAME (NOT SELF): \_\_\_\_\_ PHONE: \_\_\_\_\_

I/we have read and fully understand all of the above information and attest that given medical information is correct.

\_\_\_\_\_  
PARENT/ LEGAL GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARTICIPANT'S SIGNATURE

\_\_\_\_\_  
DATE