

# franco's 2010 Summer Camp Registration



Camper's Last Name \_\_\_\_\_ First Name: \_\_\_\_\_  
 Member Account #: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_  
 Mother's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Father's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

## HOURS

Camp: 8:30am – 3:30pm  
 AM Care: 7:30am – 8:30am  
 PM Care: 3:30pm – 6:00pm

## AGE GROUPS

4 – 5\* year olds / Yellow  9 - 10 year olds / Blue  
 5\* - 6 year olds / Orange  11 - 13 year olds / Purple  
 7 - 8 year olds / Green \* dependent on swim ability level

## WEEKLY SESSION RATES *(includes lunch, snack, events & field trip)*

EARLY BIRD RATE for all returning campers March 1<sup>st</sup> – 19<sup>th</sup> only  \$199

WEEKLY RATES after March 19<sup>th</sup>  \$229/members  \$249/non-members

SESSIONS	WEEKLY FEE		SWIM SCHOOL	AM Care	PM Care
8:30am – 3:30pm	Member	Non-Mbr	(Attach Swim Reg Form)	7:30am – 8:30am	3:30pm – 6pm
<b>Registration Fee</b>	<input type="checkbox"/> \$60	<input type="checkbox"/> \$75	<b>4 days, 30-min lessons</b>	\$5/day drop-in fee	\$8/day fee
<b>Week 1: May 24 - 28</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 2: May 31 – June 4</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 3: June 7 - 11</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 4: June 14 - 18</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 5: June 21 - 25</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 6: June 28–July 2</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 7: July 5 – 9</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 8: July 12 – 16</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 9: July 19 – 23</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 10: July 26 – 30</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>Week 11: Aug 2 – 6</b>	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$_____	<input type="checkbox"/> \$55/mbr <input type="checkbox"/> \$70/nm	<input type="checkbox"/> \$20/week	<input type="checkbox"/> \$35/week
<b>SUB TOTALS</b>	\$ _____	+ \$ _____	+ \$ _____	+ \$ _____	+ \$ _____

Every camper receives one (1) complimentary Summer Camp T-shirt and Backpack **Extra Camp Shirt**  \$15

Youth M  Youth L  Youth XL  Adult S  Adult M  Adult L **Extra Backpack**  \$15

<p><b>For Office Use:</b></p> <p><input type="checkbox"/> Check # _____ <i>(make checks payable to Franco's Athletic Club)</i></p> <p><input type="checkbox"/> Membership Account Charge # _____</p> <p><input type="checkbox"/> Credit Card Please circle: VISA MC AMEX DISC</p> <p>C.C. Number: _____ Exp _____</p>	<p><b>Payment Method</b></p>	<p>Posted:</p>
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**SUB TOTAL** \$ \_\_\_\_\_  
 -10% for 2<sup>ND</sup> Child on session fee only - \$ \_\_\_\_\_  
 -10% for entire summer enrollment on session fee only - \$ \_\_\_\_\_

**GRAND TOTAL** \$

Member Signature \_\_\_\_\_ Staff Initials \_\_\_\_\_ Date \_\_\_\_\_

## Health Information

- 1) Is your child allergic to any foods?  
No\_\_\_\_\_ Yes\_\_\_\_\_ If yes, please specify type and reaction\_\_\_\_\_
- 2) Is your child allergic to any medication?  
No\_\_\_\_\_ Yes\_\_\_\_\_ If yes, please specify type and reaction\_\_\_\_\_
- 3) Is your child taking any medication?  
No\_\_\_\_\_ Yes\_\_\_\_\_ If yes, please specify\_\_\_\_\_
- 4) Does your child have:  
Asthma\_\_\_\_\_ Diabetes\_\_\_\_\_ Epilepsy\_\_\_\_\_ Heart Problems\_\_\_\_\_ ADD/ADHD\_\_\_\_\_
- 5) Are there any special conditions of which that we need to be aware?  
\_\_\_\_\_

## Emergency Information

Physician's Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Whom should we contact in case of an emergency? \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Others authorized to pick up child: \_\_\_\_\_

In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp director to hospitalize, to secure proper treatment for, and to order injection and/or anesthesia and/or surgery for the person named above. This form may be photocopied for use out of camp.

## Transfer/Credit Policy

Due to scheduled staffing and food preparation, campers who wish to transfer session dates must submit written notification 2 weeks prior to the registered dates that are to be transferred & can only be transferred if dates are available. Campers will not be given credit/refunds for any registered days that were missed.

## Publicity Release

By signing this form, I give permission to use any photographs involving the child registered on this form to Franco's Athletic Club in any publication, news release or any other form of advertising and release all rights thereunto pertaining.

## Reprimand Policy

The following reprimand policy will be enforced throughout the summer camp. **Please read this section completely.** Incidents upon which this policy will be enforced include, but are not limited to: fighting, use of foul language, disrespect to staff members, other campers or members and failure to follow instructions.

1. Upon the first infraction, the child will be removed from the activity and placed in "time-out". He/she will be made aware of the reasoning for the punishment and the consequences. The camp director will be made aware of the situation and a written documentation of the incident will be kept on file. The incident will be documented and reported to the parents. The parents will be required to sign an incident report, which documents the behavior and action taken.
2. Upon the second infraction, the child will be removed from the activity and placed in "time-out". He/she will be made aware of the reasoning for the punishment and the consequences. The camp director will directly contact the parents and inform them of the situation. The parents will be required to sign an incident report, which documents the behavior and action taken. The parents will be warned that any further infractions will result in removal from the camp.
3. Upon the third infraction, the child will be removed from the activity and asked to sit in the director's office. The director will notify the parent's and request that the child be removed immediately. At this point the child will not be allowed to return to camp.  
**A prorated refund will be offered to the parents of the child.**

## Club Waiver Release

Participant's guardian expressly agrees on his/her behalf that all uses of club shall be undertaken at his/her sole risk and that the Club's owners, managers, and employees shall not be liable for any damages or injuries to any member or guest, or be subject to any claim or demand whatsoever. Each participant assumes responsibility for him/herself and on behalf of his/her executors, administrators, and assigns, does fully and forever waive, release, and discharge the Club's owners, managers, employees, and agents from any and all claims, demands, damages, rights of action, or causes of action, present or future, whether the same be known or unknown, anticipated, or unanticipated, resulting from, or arising out of, the Member or his/her guest, or his/her minor children's use or intended use of the Club's facilities and equipment. I consent to pictures being taken of the Participant and understand that any such pictures will become property of the Club. They may be used for promotional purposes without payment of fees or other compensation to Participant.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_