



BOYS & GIRLS CLUBS  
OF SOUTH COUNTY

# 2020 Thanksgiving Day Camp

Thanksgiving Session: November 23, 2020– November 25, 2020

Camp Hours: 7:30 am– 5:30 pm

**\*NO CLUBHOUSE HOURS\***

Drop Off Time: 7:30 am– 8:30 am

**NO Exceptions**

Required Everyday: Sack lunch, 2 Water bottle(s), snacks, mask.

Weekly 3-day Fee: \$90 per member

Annual Membership: \$50 per child (July 2020-June 2021)

*Payments must be made by Wednesday at 4:30 PM for the following week. First week's payment plus the membership fee are due at the time of your registration appointment.*

☐ **Week 1: November 23-25, 2020**

Receipt #: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\* Dates and hours are subject to change.\*\***

I understand that all fees paid for must be used for the corresponding weeks during Camp. I have reviewed and understand the camp hours, fees, and membership details. I have read and signed the following documentation related to COVID-19 (initial each form/waiver):

\_\_\_\_\_ COVID-19 Parent/Member Expectation Form

\_\_\_\_\_ Assumption of the Risk and Waiver of Liability Relating to COVID/19

\_\_\_\_\_ **I also understand that ALL fees are NON-REFUNDABLE and/or NON-TRANSFERABLE.**

In consideration for permitting my child to participate in these events, I agree to indemnify and hold harmless the Boys & Girls Clubs of South County and its officers, agents, employees and volunteer aides from any liability that may occur during the course of their attendance in the program. I further agree that if a medical emergency should arise during the course of Camp and I cannot be reached, the Boys & Girls Clubs of South County employees or volunteer aides shall have my permission to secure the necessary medical treatment for my child. Furthermore, I am aware that my child can not participate without this written permission slip. **Verbal Permission is not allowed.**

**Child** First Name: \_\_\_\_\_ **Child** Last Name: \_\_\_\_\_ Age: \_\_\_\_\_

**Parent** Name: \_\_\_\_\_ **Parent** Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Emergency** Number: \_\_\_\_\_ **Second** Emergency Number: \_\_\_\_\_