



**BOYS & GIRLS CLUBS  
OF SOUTH COUNTY**

# Winter Day Camp 22

Session Begins : Dec 19, 2022 — Jan 6, 2022

Hours: 7:30 am– 5:30 pm

Drop Off Time: 7:30 am– 8:30 am (NO EXCEPTIONS)

Required Everyday: Lunch, 3 Water bottles, snacks, mask (optional).

Weekly Fees: \$150 per member

Annual Membership: \$50 per child (July 2022- June 2023)

*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.*

**\*Minimum of 20 children enrolled**

**Please check all weeks your child will attend:**

<input type="checkbox"/> <u>Week 1: Dec 19—Dec 21, 22</u> ( M-W \$90)	Receipt# _____	Date: _____
<input type="checkbox"/> <u>Week 2: Dec 26—Dec 28, 22</u> ( M-W \$90)	Receipt# _____	Date: _____
<input type="checkbox"/> <u>Week 3: Jan 2—Jan 6, 22</u> ( M-F \$150)	Receipt# _____	Date: _____

**\*\* All information is 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: \_\_\_\_\_