

SM SUMMER CAMP @
4-9 YEAR OLD 2018 CAMPER REGISTRATION



**ORANGE LAWN
TENNIS CLUB**
FOUNDED 1880

Camper(s) Name *2 campers per registration

Age(s)

CAMP PROGRAM

Weekly camp program runs Monday - Friday 9:00am - 1:00pm LUNCH INCLUDED

COST: 1) MEMBER OLTC: \$365 per week / per camper **WEEK 3 Prorated No July 4th (\$292)

2) NON-MEMBER OLTC: \$385 per week/ per camper **WEEK 3 Prorated No July 4th (\$308)

EARLY DROP-OFF: 8am Drop-Off \$70/per week add-on

50% DEPOSIT DUE: WITH REGISTRATION

FINAL PAYMENT DUE: MAY 1, 2018

Please put an X in each applicable box for camp and early drop-off if needed:

WEEK 1	WEEK 2	WEEK 3**	WEEK 4	WEEK 5	WEEK 6
JUNE 18 - JUNE 22	JUNE 25 - JUNE 29	JULY 2- JULY 6** see above	JULY 9 - JULY 13	JULY 16 - JULY 20	JULY 23- JULY 27
Early Drop Off _____	Early Drop Off _____	Early Drop Off _____	Early Drop Off _____	Early Drop Off _____	Early Drop Off _____
WEEK 7	WEEK 8	WEEK 9	WEEK 10	WEEK 11	SUBTOTAL
JULY 30 - AUG. 3	AUG. 6 - AUG. 10	AUG. 13 - AUG. 17	AUG. 20 - AUG. 24	AUG. 27 - AUG 31	\$365/ WEEK MEMBER \$385/ WEEK NON MEMBER \$70/ WEEK EARLY DROP
Early Drop Off _____	Early Drop Off _____	Early Drop Off _____	Early Drop Off _____	Early Drop Off _____	

SIGNATURE CAMP T-SHIRT \$12 *optional XS S M L XL

PAYMENT

Parent Name _____ Date _____

CASH CHECK* TOTAL WEEKS REGISTERED _____ TOTAL AMOUNT DUE \$ _____
DEPOSIT (50%) AMOUNT \$ _____ REMAINDER DUE MAY 1ST \$ _____

****PLEASE MAKE CHECKS PAYABLE AND REMIT TO:**

S.M. TENNIS INC.
2995 RUTH STREET
MIAMI, FL 33133

OFFICE USE ONLY: Deposit (amount and date) _____ Paid in full _____

CAMPER INFORMATION

This form must be completed by a parent or legal guardian, maximum of *TWO* campers per agreement.

_____ / _____ / _____
Full Name of Camper 1 (First, M.I., Last) Nickname DOB (mm/dd/yr) Grade 2019

Address, City, State, Zip Code

_____ / _____ / _____
Full Name of Camper 2 (First, M.I., Last) Nickname DOB (mm/dd/yr) Grade 2019

Address, City, State, Zip Code

_____ (_____) _____ (_____) _____
Name of Parent or Legal Guardian of Camper(s) Home Phone Cell Phone

Address, City, Sate, Zip Code (if different from Camper 1 address)

Preferred Email Address of Parent or Legal Guardian

Alternate Email Address

EMERGENCY CONTACTS AND AUTHORIZED PICK-UP PERSONS

Campers may only be released from Orange Lawn Tennis Club to Camper's parent or legal guardian, OR to a person that has been identified and designated as an authorized pickup (below). All individuals are responsible for complying with Orange Lawn Tennis Club's policies. Government issued ID may be required prior to camper's release.

In the event of an emergency parents/guardian will be notified. Please list additional emergency contacts in case parent/guardian are unavailable.

_____ (_____) _____ (_____) _____
Emergency Contact 1 Relationship Home Phone Cell Phone

_____ (_____) _____ (_____) _____
Emergency Contact 2 Relationship Home Phone Cell Phone

_____ (_____) _____ (_____) _____
Authorized Pick-up 1 Relationship Home Phone Cell Phone

_____ (_____) _____ (_____) _____
Authorized Pick-up 2 Relationship Home Phone Cell Phone

SPECIAL NEEDS

Please list any special needs, allergies, medical conditions, injuries, or other information Orange Lawn Tennis Club may need to make Camper’s experience a positive one. If none please list: NONE.

Camper 1

Camper 2

SWIMMING

All campers will do a swim test to determine their ability to enter the water. I feel my child’s swimming abilities (pure beginner, intermediate, etc.) are:

Camper 1

Camper 2

MEDICAL ATTENTION

I agree that in the event of emergency or if a Camper is involved in an accident that requires medical attention I allow Orange Lawn Tennis Club to contact emergency services and to make decisions regarding any and all survival procedures if necessary. In the event parents/guardians are not available I authorize the Camper’s physician/undersigned to make immediate medical decisions.

Camper 1 Physician _____ Address/Clinic _____ (____) _____ Telephone

Camper 2 Physician (if different from Camper 1) _____ Address/Clinic _____ (____) _____ Telephone

ADMINISTRATION OF MEDICATION

Please check one of the following:

___ I **DO NOT** allow Orange Lawn Tennis Club to administer over the counter and/or prescription medications to camper(s).

___ I **DO** allow Orange Lawn Tennis Club to administer over the counter or prescription medications to camper(s).

CANCELATION POLICY

Cancellations will be allowed until **May 1, 2018**, if we are able to fill the cancelled spot a refund of deposit will be given. ****Cancellations made after May 1, 2018 forfeit entire deposit amount.**

DEPOSIT REQUIREMENTS AND FEE SCHEDULE

Deposit amount equals 50% of total tuition costs. Deposits must accompany completed registration form.

****Weeks cannot be held without completed registration form and required deposit.**

Deposits are required **WITH REGISTRATION** to guarantee a spot.

Full payment must be made on or before **MAY 1, 2018**.

No refunds will be given for Campers who miss days or weeks.

LUNCH

Orange Lawn Tennis Club will provide a lunch, snacks, and drinks at no additional charge. Campers with special diet needs, allergies, or do not like the menu choices, need to bring their own lunch that is clearly labeled with camper's name and date. Refrigeration will be available.

APPAREL POLICY**

Campers are expected to respect the dress code at Orange Lawn Tennis Club that is applicable to all members and non-members. White clothing with 10% or less color trim is acceptable at the tennis courts. Trim may not be larger than 1/2". Boys MUST wear collared shirts. Swim suits are not permitted anywhere other than at the pool area and locker rooms. **Campers aged 4-6 are not required to wear white on tennis courts; their instruction will be on the Paddle Courts.

RULES AND REGULATIONS

I understand and will comply with Orange Lawn Tennis Club camp regulations, which are subject to change without notice. I acknowledge Orange Lawn Tennis Club reserves the right to remove Campers from the camp for conduct that is deemed detrimental to other Camper's, camp staff or property. Make up sessions will not be given for missed sessions, without prior notice.

ASSUMPTION OF RISK, RELEASE OF PROMOTIONAL PICTURES, WAIVER

I understand that there are risks of injury in participation of Orange Lawn Tennis Club Summer Camp. I understand that risks include but are not limited to: slip and falls, trips, collisions, overexertion, loss of property, equipment malfunction, or other accidents that may result in harm, loss, disability, or other injury or damage to Camper(s).

I hereby volunteer and forever release Orange Lawn Tennis Club from, and agree not to sue, Orange Lawn for any and all present and future claims, actions, damages, losses, or any other alleged liabilities or obligations, for any injuries which arise out of, result from, or are caused by Orange Lawn Tennis Club.

All S.M. Tennis Camp images, pictures and/or videos may be used to advertise the All Sports Camp and/or Orange Lawn Tennis Club.

I fully understand and voluntarily accept responsibility for and choose to allow my Camper(s) to participate in Orange Lawn Tennis Club Summer Camp. I hereby certify that I have read and understand this agreement and accept the terms and conditions of this application. I agree Camper(s) will receive the privilege of participating in the Camp Program and I agree he or she will abide by all rules and regulations of Orange Lawn Tennis Club.

Signature of Parent or Legal Guardian of Camper(s)

Date