

Ellis Athletic Center **KIDSCAMP** Registration 2017
Sports, Fun & Games

KIDS INFO

CHILDS NAME _____ AGE _____

ADDRESS _____

*ALLERGIES _____ YES NO

If yes please note _____

PARENT / CARETAKER INFO – please print clearly

NAME _____ EMAIL _____

EMERGENCY CONTACT NUMBER _____

ADDRESS: if different from above _____

CAMP DATES & TIMES

Mon & Wed July 24 & 26 1:30p - 4:00p Tues & Thurs July 25 & 27 9:00a – 12:00p
Mon & Wed August 21 & 23 1:30p - 4:00p Tues & Thurs August 22 & 24 9:00a - 12:00p

Please circle CAMP DATES your child will attend

JULY 24 25 26 27

AUGUST 21 22 23 24

\$25/day

10% OFF for additional siblings _____ Total Days/Fee

Please circle LUNCH BUNCH dates your child will attend for \$10 ADD-ON fee a day

JULY 25 27

AUGUST 22 24

_____ yes my child would like the lunch included. (fruit, yogurt, pretzel & cookie)(\$10/day)

_____ I am packing a lunch for my child. (\$10/day)

_____ Total Days/Fee

DETAILS FOR PARENTS: Lunch Bunch will run from 12:00p-12:45p on Tues/Thurs. **yogurt, pretzel, fruit cup, cookie & a bottle of water** will be provided by Luigi & Giovanni. Pretzels and goldfish are provided for snack during camp. Check, credit card and personal check are accepted, checks to be made out to Ellis Athletic Center. Please turn in camp forms at the Front Desk. Recommended ages 3-10yr.

_____ TOTAL

The undersigned acknowledges that they have examined the facilities and that they accept them in the present condition. Furthermore, the undersigned voluntarily assumes any and all risk involved in the use of the facility, equipment and personnel and releases the club from all claims and liabilities; I, the undersigned, voluntarily assume all risks of injury while using any of FACTS Inc. equipment or Ellis Athletic Center facilities. The possible risks associated with physical activity include but are not limited to muscle strain, muscle tear, shin splints, broken bones, heat related injuries, abnormal heart beat, abnormal blood pressure and in rare instances heart attack or death. I voluntarily waive any and all claims of injury against FACTS, Inc.; Fitness Awareness Consulting Teams, Inc.; FACTS Fitness, Inc.; Ellis Athletic Center, LLC; Berwind Property Group; BPG Real Estate Investors, Straw Party I, LP; BPG Management Co.; its trustees, officers, employees, agents and contractors.

PARENT SIGNATURE _____

DATE _____

Thank you.



ELLIS ATHLETIC CENTER
HEALTH • MOTIVATION • COMMUNITY