



# Little Giants

## Ages 2-3.5

TPC Summer Camp 2017 is quickly approaching. We will be offering camp for children 2–3.5 years of age. Camp is nine weeks starting June 12<sup>th</sup>–August 18<sup>th</sup>, No camp the week of July 3<sup>rd</sup>. **Camp is offered Monday–Friday from 9:00am–12:00pm for the 2–3.5 camp.**

Registration begins Monday, February 6<sup>th</sup>. Members have 4 weeks to register before registration is opened to non–members. Registration is first come, first serve. Don't hesitate!

Register with Juliana at the front office during open registration. All forms (registration, medical release, liability release, pick–up authorization, and swim information) are to be filled out prior to registration. Each family is responsible for their own registration.

All camp staff will be American Red Cross certified in Standard First Aid and CPR. Improved safety and organization procedures will be applied to pool activities and pick–up times.

### **Cancellation Policy:**

The Cancellation deadline is Monday, May 1<sup>st</sup>. **NO Refunds given after Monday, May 1<sup>st</sup>.** Any cancellations after May 1<sup>st</sup> and two weeks prior to start date, you will be charged 50%. **NO Refunds given within 2 weeks of your start date.**

We look forward to another great summer at TPC. Please contact me with any questions.

Sincerely,

Juliana Moreno

Director of Youth Activities/Membership Manager

[julianai@tiburonpc.org](mailto:julianai@tiburonpc.org)

1–415–937–5015



### A Typical Day:

9:00-9:15	Drop Off
9:15-10:00	Play time on play structure
10:00-10:15	Snack
10:15-11:00	Art
11:00-11:30	Music
11:30-12:00	Story Time & Pick Up

### 15 minutes Crying Policy

If your child has difficulty adjusting to the program and cannot stop crying after a period of 15 minutes, we will ask you to remove him/her from the group and to try again on another day. We would like TPC to be an enjoyable and exciting experience for all participants.

### Snack

A filling snack, apple juice and or water will be fed to the kids at 10:00 am. Snack is included in the price.

### Day Care

If you are unable to pick up your child by noon, they will be brought to Day Care. Day Care is a separate charge.

# TPC Summer Camp 2017 Member Registration Form

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Parent/Guardian's Name(s): \_\_\_\_\_  
Home Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_

**Member Fees: Please CHECK the box you would like to register your child for:**

**Member (\$200)**       **Non-Member (\$260)**

- Week 1: June 12-16 Walk of Fame
- Week 2: June 19-23 Adventurland
- Week 3: June 26-30 Party in the USA
- Week 4: July 3-7 NO CAMP**
- Week 5: July 10-14 TPC Olympics
- Week 6: July 17-21 Goin' Green
- Week 7: July 24-28 Carnival Week
- Week 8: July 31-August 4 Wacky Week
- Week 9: August 7-11 Endless Summer
- Week 10: August 14-18 All things FUN at TPC!!

Below, please circle **EACH** week you would like to register your child for.

Camper's Name: \_\_\_\_\_ Birth date \_\_\_\_\_ Age \_\_\_\_\_  
Camp Week #: 1   2   3   4   5   6   7   8   9   10

Camper's Name: \_\_\_\_\_ Birth date \_\_\_\_\_ Age \_\_\_\_\_  
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\_\_\_\_\_  
Parent/Guardian Signature

# TPC Summer Camp 2017 Medical Release Form

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Child's Name \_\_\_\_\_ Child's Name \_\_\_\_\_

Child's Name \_\_\_\_\_

In case of emergency, please contact the following people (After parents/guardians):

1. \_\_\_\_\_ Phone #s \_\_\_\_\_

2. \_\_\_\_\_ Phone #s \_\_\_\_\_

Please list any special circumstances, medical conditions or allergies each child (include name) may have that the Tiburon Peninsula Club camp staff needs to be aware of.

\_\_\_\_\_  
\_\_\_\_\_

Please list any food allergies your child may have:

Child's name \_\_\_\_\_ Food(s) \_\_\_\_\_

Child's name \_\_\_\_\_ Food(s) \_\_\_\_\_

Child's name \_\_\_\_\_ Food(s) \_\_\_\_\_

Please list your insurance carrier, policy#, and pediatrician:

Insurance Carrier \_\_\_\_\_ ID # \_\_\_\_\_

Pediatrician \_\_\_\_\_ Phone# \_\_\_\_\_

In the case of an emergency, I give the Tiburon Peninsula Club permission to provide emergency care for my child.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# DROP-OFF AND PICK-UP PROCEDURES

## Drop-Off (9:00-9:15)

Please park in the dirt lot and walk your children to the kids zone. Check your children in with their Lead Counselor. Notify the Lead Counselor when you drop your children off if someone other than you will be picking them up.

TPC Camp staff will not allow children to leave camp without proper authorization, unless a parent/guardian has specified to Juliana or the child's Lead Counselor.

## Pick-Up (11:45-12:00)

Please park in the dirt lot and sign your child out with their Lead Counselor in the playground area. Please be on time. There is a **\$10 charge for every 15 minutes late (after 12:00)**.

The following people are authorized to drop-off or pick-up my children from TPC Camp:

Name \_\_\_\_\_ Phone #s \_\_\_\_\_

Relation \_\_\_\_\_

Name \_\_\_\_\_ Phone #s \_\_\_\_\_

Relation \_\_\_\_\_

Name \_\_\_\_\_ Phone #s \_\_\_\_\_

Relation \_\_\_\_\_

If someone other than the people above will be picking my child up, I will notify my children's Lead Counselor or Juliana.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



**TIBURON PENINSULA CLUB**  
**ACKNOWLEDGMENT OF RISK, RELEASE OF LIABILITY**  
**AND INDEMNIFICATION AGREEMENT**  
**(With Consent of Parent or Guardian of Minor)**

**THIS IS AN IMPORTANT LEGAL DOCUMENT.**

**READ IT CAREFULLY BEFORE SIGNING.**

This Agreement is given by me for the benefit of the Tiburon Peninsula Club and its affiliates, agents, employees, directors, officers, and insurers (collectively "the Club"). By executing this Agreement I am binding myself, and/or the minor participant named below, including but not limited to, my/his/her children, heirs, estate, personal representatives, assigns, and next of kin.

In consideration of being allowed, in any way and for any purpose, to use the facilities of, and participate in the activities of, the Club I agree that:

**1. RISKS.**

I acknowledge and fully understand that I, or the minor participant named below, will be voluntarily engaging in activities that may involve RISK OF SERIOUS INJURY, INCLUDING PERMANENT DISABILITY AND/OR DEATH. Severe social and economic losses might result from these risks. These risks may arise not only from my/his/her own actions, inaction or negligence, but the actions, inaction or negligence of others, including, but not limited to, the Club, the rules of play or the condition of the premises or the condition of any equipment. Further, other risks, not known to me or not reasonably foreseeable at this time, may exist.

I will inspect the facilities and equipment and if I believe anything is unsafe, I will advise the Club immediately and refuse to participate, and/or refuse to allow the minor participant named below to participate.

- 2. ASSUMPTION OF ALL RISKS, WAIVER AND RELEASE OF LIABILITY.**  
**3. I, on behalf of myself, and/or the minor participant named below, ASSUME ALL RISKS associated with my/his/her use of, or participation in, activities of the Club. I RELEASE AND WAIVE THE CLUB FROM ALL LIABILITY, CLAIMS OR DEMANDS arising out of my participation at and use of the Club and/or the participation at and use of the Club of the minor participant named below even if the liability arises out of the Club's own negligence, the negligence of another, or out of negligence that may not be foreseeable at this time.**

I hold harmless, discharge and agree not to sue the Club for any liability arising out of my use or participation, or the use or participation of the minor participant named below, of the Club.

**4. INDENIFICATION.**

I will indemnify the Club for any loss, liability, damage, or cost it may incur due to my use of or participation in the activities of the Club or the use of or participation in the activities of the Club by the minor participant named below whether caused by the negligence of the Club or otherwise.

5. **WAIVER OF CALIFORNIA CIVIL CODE SECTION 1542.** I expressly waive, on behalf of myself and/or the minor participant named below, the benefit of California Civil Code Section 1542 that provides as follows:

A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the Release, which if known to him must have materially affected his settlement with the debtor.

6. **REPRESENTATION OF GOOD PHYSICAL CONDITION.** I represent that I, or the minor participant named below, are in sufficiently good physical condition to participate in the programs and activities of the Club without jeopardizing my/his/her health. I currently have, or the minor participant indicated below has, no known physical or mental condition that would impair my/his/her capability and I/he/she are fully fit to participate in the activities of and use the facilities of the Club.

7. **ENTIRE AGREEMENT.** No oral representations, statement or inducements apart from this written Agreement have been made. If any portion of the Agreement is determined invalid, the balance shall continue in full force.

**I HAVE READ THIS RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT AND UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.**

\_\_\_\_\_  
Name of Participant (Please print)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Name of Participant (Please print)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Name of Participant (Please print)

\_\_\_\_\_  
(Date)

**FOR MINORS (UNDER THE AGE OF 18) PARENT OR LEGAL GUARDIAN MUST COMPLETE THE FOLLOWING:**

I, the undersigned, represent that I am the parent or legal guardian of the participant named above and by my signature below I agree to the terms of this Agreement on behalf of the minor participant named above.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
(Date)

Non-Members: Please fill out Non-Member Credit Card Authorization located on the very last page!

# Non-Member Credit Card Authorization Form

Name	
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Email Address	
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Home Phone	
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Alternate Phone	
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I, \_\_\_\_\_, as a Non-Member of the Tiburon Peninsula Club, am hereby authorizing the Tiburon Peninsula Club to use the credit account shown below for payment of services rendered by the Tiburon Peninsula Club.

Account Type:

Visa/Master Card     American Express     Check# \_\_\_\_\_

Credit Card Number

Expiration Date

Security Code

Print Card Holder Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Director's Signature / Date

Disclaimers:

- Under no circumstances shall we, (TPC), be liable for any injury, loss, damage, or expense suffered or incurred with respect to any program offered at the TPC.
- We, (TPC), reserve the right to interpret any and all conditions and situations listed on those not here listed in such a manner as we deem appropriate.
- There is 24 Hour cancellation policy (some programs may differ), if you chose not to cancel and do not show up, you credit card will be charged.

\*Please Note TPC will notify you by the email address provided of all charges that will be made to your credit card if you are not present of the time of the program.

