

# TPC Sports Camp

## Ages 8-11

The logo for Tiburon Peninsula Club Sports Camp is a circular emblem. It features a central figure of a person swimming in a pool, surrounded by various sports icons like a tennis racket, a tennis ball, and a swimmer. The text 'PENINSULA CLUB' is at the top and 'SPORTS CAMP' is at the bottom of the circle.

**Tennis, Swim and Fitness are coming together to create a sports camp, offering an outstanding teaching experience with optimal instruction/student ratio.  
Tiburon Peninsula Club is the place to be this summer.**

TPC Sports Camp 2017 is quickly approaching. We will be offering camp for children 4-8 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>.

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

### TPC Sports Camp Dates:

Week 1:	June 12-16 FT-Movies (Thur-Cars 3)
Week 2:	June 19-23
Week 3:	June 26-30
<b>Week 4:</b>	<b>July 3-7 (No Camp)</b>
Week 5:	July 10-14 FT-( Thur-Exploratorium)
Week 6:	July 17-21
Week 7:	July 24-28 FT-(Thur-Howarth Park)
Week 8:	July 31 <sup>st</sup> -Aug. 4
Week 9:	August 7-11 FT-(Thur.-Rebounderz)
Week 10:	August 14-18

Ages 8-11

9:00-9:30 Drop off/Lawn Games

9:45-10:45 Swimming/Water Polo (Main Pool)

11:00-11:30 Snack

11:30-12:30 Tennis (Lower Courts)

12:30 Lunch

\*1:15 Fitness Activity #1

\*2:15 Fitness Activity #2

3:30 Pick-Up (Back Patio)

\*Fitness Activities will include the following: Taekwon Do, Basketball and Soccer and Lacrosse

## TPC Sports Camp 2017 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**

**Non-Member**

**TPC Sports Camp-Ages 8-11:**

**\$400-450 Member                      \*\$520-585 Non Member**

9:00-3:30 includes snack and lunch

\*Non-Members please fill out the Non-Member Credit Card  
 Authorization form located on the very last page.

Price will vary due to a Field Trip Week

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

1. **Camper's Name:** \_\_\_\_\_ **Age** \_\_\_\_\_

Camp Week #: 1 2 3 **\*4** 5 6 7 8 9 10

**\*No Camp Week 4: July 3-7.**

Please circle **EACH** week you would like Morning or Evening Care for the following weeks:

Camp Week #: 1 M or E 2 M or E 3 M or E 5 M or E 6 M or E 7 M or E 8 M or E 9 M or E 10 M or E

2. **Camper's Name:** \_\_\_\_\_ **Age** \_\_\_\_\_

Camp Week #: 1 2 3 **\*4** 5 6 7 8 9 10

**\*No Camp Week 4: July 3-7.**

Please circle **EACH** week you would like Morning or Evening Care for the following weeks:

Camp Week #: 1 M or E 2 M or E 3 M or E 5 M or E 6 M or E 7 M or E 8 M or E 9 M or E 10 M or E

3. **Camper's Name:** \_\_\_\_\_ **Age** \_\_\_\_\_

Camp Week #: 1 2 3 **\*4** 5 6 7 8 9 10

**\*No Camp Week 4: July 3-7.**

Please circle **EACH** week you would like Morning or Evening Care for the following weeks:

Camp Week #: 1 M or E 2 M or E 3 M or E 5 M or E 6 M or E 7 M or E 8 M or E 9 M or E 10 M or E

**"NEW" Cancellation Policy:**

The Cancellation deadline is Monday, May 13<sup>th</sup>. **NO** Refunds given after that date. Any cancellations after May 13<sup>th</sup> and two weeks prior to start date, you will be charged 50%. **NO** Refunds given within 2 weeks of your start date.

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

\_\_\_\_\_  
Date:



*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

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

**\*Campers should be dropped off at the playground by 9:00am. At 9:15am campers will gather around tree to hear daily updates.** The first Camp activity begins at **9:30am**. Please have your camper(s) at the drop-off area before the first event begins. 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 (3:30)

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 3:30)**.

### Morning (7:30am-9:00am/Evening Care (3:30pm-5:00pm)

We will be offering morning/evening care before and after camp. It will be located in the Teen Room. This is will be an extra fee. (\$50 Morning Care/\$50 Evening Care)

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

## TPC Sports Camp 2017 SWIM INFORMATION

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(One form for each child)

We need information regarding your child's swimming ability in order to safely place them in a swim group. Please fill out the following form. Additional comments on fears, goals, etc. are appreciated.

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

Please Check Skill Level:

- Non-Swimmer**
- Beginner** (basic stroke technique, froggy, torpedo, willing to put face in water, can't breathe independently)
- Intermediate** (knows basic stroke technique, free style, can breathe independently, can swim about half of a lap unassisted, comfortable going under water)
- Advanced** (can swim a full lap, breathe on their own, knows basic free style, breast stroke, back stroke, comfortable going under water)

Additional comments you would like the swim staff to know about your child: (Please Contact Kirsten Frazer if you have any questions or concerns at 415.937.5018 or by email at [kirstenf@tiburonpc.org](mailto:kirstenf@tiburonpc.org))

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**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.

