



PRSC Holiday Sports Camp Registration

Please complete ONE application per child. Complete entire packet for valid registration.

Participant Name: _____ Member #: _____
 (Last) (First) Non-member (please check): _____

Age (first day of camp) : _____ Date of Birth: ____/____/____ Gender (circle): M F

New to Program (circle): yes no

Parent's Name: _____ Phone (H): _____ Phone (W): _____ Phone (Cell): _____

Street: _____ City/State/Zip: _____/____/____

Email Address: _____

Authorized Individuals for pick up: _____

In case of emergency, contact:

Name: _____ Phone: _____

Doctor: _____ Insurance Co. _____ Policy #: _____

Any special concerns: _____

	Dates	Circle Selections		Lunch?	Cost
Thanksgiving	11/20-11/24		or Day Only: M T W F		
Winter Break					
Week 1	12/18-12/22	Full Week	or Day Only: M T W Th F		
Week 2	12/26-12/29		Day Only: T W Th F		
Week 3	1/1-1/5	Full Week	or Day Only: M T W Th F		
Week 4	1/8		Day Only: M		
Holiday	1/15		Day Only: M		
Holiday	2/12		Day Only: M		
Holiday	2/19		Day Only: M		
Spring Break					
Week 1	3/26-3/30	Full Week	or Day Only: M T W Th F		
Week 2	4/2-4/6	Full Week	or Day Only: M T W Th F		
			Camp Subtotal		
				Lunch Subtotal	
				TOTAL	

Fees
 \$196 (\$236) Week, add \$35 for Lunch
 \$49 (\$59) Day, add \$7 for Lunch
 Non-member prices are listed in parenthesis
 10% off the total for siblings

**Payment must be made in full to reserve spot in camp.
 Cancellations must be given one week in
 advance for refund.**

Internal Use Only: Pd by _____ Date _____ Initials _____

Express Assumption of Risk Agreement and Release of Liability and Indemnity Agreement

I, the undersigned Parent(s), Legal Guardian(s), or Participant, on my own behalf, and behalf of all others who are listed as Participants under this Agreement, including my unborn and/or minor children, and my and their personal representatives, assigns, successors, heirs, and next of kin, (hereinafter collectively referred to as the "Participants"), acknowledge and agree that the use of the facilities, services, equipment or premises of Paso Robles Sports Club (the "Club") by any of the Participants involves potential and/or inherent dangers, hazards and risks of injury to persons and property, and the Participants assume full responsibility for such risks for myself/themselves. The Participants agree and acknowledge that I/they have entered into the Agreement for use for use of the Club's facilities, services, equipment, or premises primarily for recreational purposes and not to use any specific piece of equipment or training or exercise methodology. In consideration of being permitted to enter the Club's facilities for any purpose, including, but not limited to, observation, use of facilities, services, or equipment, or participation in any way, the Participants agree to the following: the Participants are authorized to, and do hereby release, defend, and hold the Club, its and their shareholders, directors, officers, parents, subsidiaries, employees, volunteers, members, managers, independent contractors, and agents harmless from all liability to all the Participants, and any of my/their personal representatives, assigns, heirs and next of kin for any loss or damage sustained by any of the Participants. The Participants hereby waive, release and forever discharge any and all claims or demands therefore based on, or on account of, any injury or death to any of the Participants and property loss or damages sustained by any of the Participants, whether or not foreseeable, caused by the active or passive negligence of the Club or otherwise, while any of the Participants is in, upon, or about the Club's premises, or while using the Club's facilities, services, or equipment or while participating in any Club activity at any location.

This Express Assumption of Risk Agreement and Release of Liability and Indemnity Agreement (the "Release"), includes, but is not limited to, claims based on the following: the Club's improper maintenance of its equipment (mechanical or otherwise), grounds or facilities, negligent instruction or supervision, including personal training, or inadequate security or staffing, the Participants' use of the Club's facilities, services, or equipment, and/or slipping or tripping anywhere in or about the Club or any location in which the Club operates, including, but not limited to public facilities. Such facilities include, but are not limited to: exercise equipment, exercise rooms, weight rooms, locker rooms, sidewalks, parking lots, stairs, pool, whirlpool, spa, sauna, steam room, tennis/racquet/squash courts, or lobby area or parking lot. Such risk of injury includes, but is not limited to injuries arising from the participation by any of the Participants, or others in supervised or unsupervised activities at the Club, injuries and medical disorders, including, but not limited to death, heart attacks, strokes, heat stress, sprains, broken bones, injured muscles and ligaments, and mental anguish, among others, arising from exercising, any recreational use of any of the Club's facilities, or otherwise, or while participating in any of Club's programs, classes, or activities, and accidental physical and mental injuries occurring anywhere in or about the Club, including its dressing rooms, showers and other facilities.

The Participants also agree to indemnify and hold the Club, its agents, officials, shareholders, directors, officers, parents, subsidiaries, employees, volunteers, members, managers, independent contractors, and agents harmless from any loss, liability, damage or cost that the Club may incur due to the presence of any of the Participants in, upon, or about the Club's premises or in any way observing or using any of the Club's facilities, services or equipment, whether or not foreseeable, caused by a Guest's negligence or otherwise. The Participants further expressly agree that the Release is intended to be as broad and as inclusive as permitted by the law of the state of California, and that if any portion of the foregoing Release is held invalid by a court of law, then that portion shall be deemed stricken and it is agreed that the remainder of the Release shall continue in full force and effect without the invalid portion. The undersigned Agrees that this Agreement shall be construed in accordance with the Laws of the State of California, without giving effect to the conflict of law provisions thereof, and that the State of California, County of San Luis Obispo.

On behalf of the Participants, I acknowledge that I have carefully read this Release and fully understand that it is a release of liability, and express assumption of risk and indemnity agreement. I am aware and agree that by executing this Release, I, and all of the Participants are giving up any rights I or any and all of the Participants may have to bring a legal action or assert a claim against the Club for injuries or losses that Participants may incur, including, but not limited to active or passive negligence, or for any defective product on its premises. I also agree that this represents the entire agreement and that there are no other oral or written promises or representations which in any modify the terms herein. Any modification to this agreement must be made in writing and be signed by both parties.

I represent that I have the actual authority to, and do hereby enter into this Release on my behalf and as an authorized agent, or parent or legal guardian for all of the Participants. I have read and voluntarily signed this Release and I further agree that no oral representations, statements or inducement apart from the foregoing Release have been made to me.

Participant Name: _____ D.O.B _____

Signature of Parent or Legal Guardian

_____/_____/_____
Date

Printed Name of Parent or Legal Guardian

Medical Authorization and Consent to Treat

Pursuant to California *Family Code* §§ 6550 and 6910, I, [redacted], a parent or legal guardian having legal custody of [redacted], a minor child, hereby authorize Paso Robles Sports Club to consent to any xray examination, anesthetic, medical, or surgical diagnosis or treatment and hospital care to be rendered to the minor under the general or special supervision, and on the advice of a physician and surgeon licensed under the provisions of the Medical Practice Act, or to consent to any x-ray examination, anesthetic, dental, or surgical diagnosis or treatment and hospital care to be rendered to the minor by a dentist licensed under the provisions of the Dental Practice Act. I agree to assume responsibility for and to pay any and all costs for the foregoing. I have no knowledge of any physical or mental impairment that would affect the Participant's ability to participate in this activity.

Acknowledgement Regarding Child Day Care Licensure

By signing below, I acknowledge that Paso Robles Sports Club is not a licensed child day care facility.

Signature [redacted] **Date** [redacted]