

COACH GLENN'S WINTER WONDERLAND CAMP
December 26, 2017 to January 5, 2017
8:30A.M. TO 5:00P.M.

Spend a week with your camp family during winter break. Enjoy all the friendship and fun of Camp while sipping hot cocoa, ice skating, indoor sports, a movie and just hanging out. Winter Camp runs from December 26th to January 5th from 8:30a.m. to 5:00p.m.

Throw on an extra layer and join us for the best Winter Break of your life!

Child's Name _____ Age _____
Address _____ Phone # _____

Email _____
Parent/Guardian Name _____ Cell # _____
Parent/Guardian Signature _____ Date _____

CAMP FEE AND DATES: CAMP BEGINS AT 8:30A.M. AND ENDS AT 5:00P.M. LUNCH **WILL NOT** BE PROVIDED. **TRANSPORTATION, AND MOST FIELD TRIPS ARE INCLUDED IN THE FEE.** (Fieldtrips that require a fee will be determined upon schedule)

Please check the session(s) your child will attend and attach a check payable to **Jasmine Galang** by **December 15, 2017.**

December 26th – December 29th _____ \$300
January 2nd – January 5th _____ \$300

DROP OFF IS AVAILABLE AT THE RATE OF \$75 PER DAY
EXTENDED CARE IS AVAILABLE TILL 6PM FOR \$10 EACH DAY.

Contact information: Coach Glenn – 510-334-1046 (cell) email: gbass65@yahoo.com
Jasmine Galang – 415-278-1799

**COACH GLENN'S WINTER WONDERLAND CAMP
LIABILITY FORM**

Participant's Name: _____

Please Read Carefully-This is a Release of Liability

Although precautions are taken to provide proper organization, instruction, and equipment for your child's participation in our programs, there can be no guarantee of absolute safety against injury and unforeseeable accident. There are elements of risk in any adventure, sport, or program involving physical exertion and risk taking, or associated with the outdoors (referred to herein as "activity"), and the use of any equipment or animals for the activity. I, on behalf of myself, my child, and any other parent of the child, understand that my child may be involved in activities including but not limited to team building initiatives, team sports and/or other physical activities as well as field trips. I acknowledge that my child may decline to participate in any activity. Any participation will be voluntary.

ACKNOWLEDGMENT OF RISKS: I recognize that there is inherent danger in any activity which involves physical exertion or risk taking; that natural hazards do exist; that although the program may not be strenuous, injuries or medical complications may occur; that certain foreseeable and unforeseeable events unique to each individual activity can contribute to the unpredictability of the activity; that balance and physical coordination may affect the occurrence of accidents or falls; and that I should ask about other potential hazards and recommended precautions and procedures.

EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY: In recognition of the inherent risks of the activity which my child will be engaged in, I confirm that my child is physically and mentally capable of participation in the activity and/or using equipment. I understand that my child will be participating willingly and voluntarily and I assume full responsibility for personal injuries, accidents or illnesses, including death. I also assume responsibility for damage to or loss of personal property as the result of any accident that may occur.

THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releases or otherwise while in, about or upon the premises of Coach Glenn's Winter Wonderland Camp and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated Coach Glenn's Winter Wonderland Camp.

On behalf of myself, my child, and any other parent of the child, I assume the risk(s) of personal injuries, accidents, illnesses and/or death.

AUTHORIZATION: I hereby authorize any medical treatment deemed necessary in the event of any injury to my child while participating in the activity. I will have appropriate insurance or, in its absence, I agree to pay all costs of rescue and/or medical services as may be incurred on behalf of my child.

RELEASE: In consideration of services or property provided, I, for myself, for my child, and for any other parent of the child, do hereby release Coach Glenn's Winter Wonderland Camp, employees and volunteers, and each and every land owner, municipal and/or governmental agency upon whose property an activity is conducted, from all liability with respect to my child and I waive any claim for damage arising from any cause whatsoever, except for any claims which are the result of gross negligence of the party or parties released herein. I authorize Coach Glenn's Winter Wonderland Camp to take and use any photographs, slides and videos of my camper for promotional purposes, brochures, flyers, website and the internet.

Parent/Guardian Signature: _____ **Date:** _____

Print Parent/Guardian Name: _____