



SUMMER CAMPS - 2019



Campers' Full Name: _____ Date of Birth: _____ Age: _____

Home Address: _____ City: _____ Zip Code: _____

Contact #1 : _____ Relation to child: _____

Cell Phone: _____ Home Phone: _____ Email: _____

Contact #2 : _____ Relation to child: _____

Cell Phone: _____ Home Phone: _____ Email: _____

Shirt Size: _____

CAMP FEES

- Half Day: 9:00am-12:00pm OR 12:30pm-3:30pm **Fee: \$95/week or \$30/day**
- Full Day: 9:00am-3:30pm **Fee: \$195/week or \$50/day**

PLEASE SELECT THE DAY(S) YOU ARE REGISTERING FOR. PAYMENT IS DUE AT TIME OF REGISTRATION.

| Week of | Sport | AM | PM | FULL DAY | M | T | W | TH | F | FULL WEEK | Paid Amnt. (Office Use Only) | Paid Date (Office Use Only) |
|-------------|-----------------|----|----|----------|---|---|---|----|---|-----------|------------------------------|-----------------------------|
| June 3th | Multi-Sport | | | | | | | | | | | |
| June 10th | Soccer | | | | | | | | | | | |
| June 17th | Multi-Sport | | | | | | | | | | | |
| June 24th | Soccer | | | | | | | | | | | |
| July 1st* | Soccer (*3 day) | | | | | | | | | | | |
| July 8th | Soccer | | | | | | | | | | | |
| July 15th | Multi-Sport | | | | | | | | | | | |
| July 22nd | Soccer | | | | | | | | | | | |
| July 29th | Multi-Sport | | | | | | | | | | | |
| August 5th | Soccer | | | | | | | | | | | |
| August 12th | Soccer | | | | | | | | | | | |

I, _____, agree that if my child is not picked up within 10 minutes of camp ending to pay a \$15 fee for After Care: _____
 (Print Name) (Sign Name)

LUNCH OPTIONS

Gourmet Gorilla caters a hot lunch to Naperville Yard Monday-Thursday. Menu's are available upon request. Every Friday cheese pizza is served. Lunch for all FULL DAY campers is included in the camp fee. Please select if your camper requires hot lunch provided by Naperville Yard.

HOT LUNCH: _____ (circle dietary restrictions): No Restrictions Vegetarian* Gluten Free* Dairy Free*

Due to our ordering calendar- any dietary restrictions must be ordered 7 days prior to camp

LUNCH FROM HOME: _____

Child's First and Last Name: _____

ALLERGIES/MEDICATIONS/ETC.

Please fill in the following information. If none please indicate with N/A.

A separate form will need to be filled out if Naperville Yard will be required to administer any medications.

Food Allergies (List)

Medication Allergies (List)

Other Allergies (List)

Physical, Mental or Emotional Health Issues (List)

ADDITIONAL INFORMATION

Please initial after reading the following:

_____ **What to Bring:** I understand campers need to bring a water bottle, snack for the morning and/or afternoon (we will provide one but you are welcome to bring your own), sunscreen, and appropriate attire (Extra clothes for junior campers recommended).

_____ **Drop Off Procedure:** I understand that campers MUST be signed in by a parent/guardian no earlier than the program start time.

_____ **Pick Up Procedure:** I understand that campers MUST be signed out by a parent/guardian. No child will be released without a parent.

_____ **Discipline Policy:** 1st offensive will be a verbal warning with camper. 2nd offense will be discussed with parents. 3rd offense is a camp suspension. No refunds will be given for disciplinary actions. I understand the Naperville Yard discipline policy.

_____ **Refund Policy:** I understand that no refund shall be given to me unless I notify Naperville Yard within one week of my athlete's program start date. If I notify Naperville Yard after the program's start date I understand that I will receive a full refund if I provide a doctor's note. If I notify the Naperville Yard after the program's start date and I do not provide a doctor's note I will not receive a full refund.

ASSUMPTION OF RISK. I understand that there are dangers, hazards, and risks ("Risks") of injury or damage ("Injuries") in the use of premises, facilities, equipment, services, activities, or products ("Use of Naperville Yard Premises and Services") of Naperville Yard Corporation, its subsidiaries and affiliates, and all of their employees, contractors, officers, directors, agents, representatives, sponsors, volunteers and any other entity or person acting for them, and all of their successors and assigns (collectively "Naperville Yard"). Risks may include but are not limited to slips, trips, collisions, falls, loss of footing or balance; equipment failure, malfunction or misuse; property theft, loss or damage, including from vehicles; and other accidents or incidents. Injuries may include but are not limited to major or minor personal, physical, bodily, emotional, mental, economic, property, or other types of injuries and damages. I understand that Risks and Injuries in the Use of Naperville Yard Premises and Services (collectively, "Risks of Injury") may be caused, in whole or in part, by the NEGLIGENCE OF NAPERVILLE YARD, me or any other person. I FULLY UNDERSTAND, AND VOLUNTARILY AND WILLINGLY ASSUME THE RISKS OF INJURY.

WAIVER OF LIABILITY: DEFENSE AND INDEMNIFICATION. On behalf of myself and my children, I hereby voluntarily and forever release and discharge Naperville Yard from, covenant and agree not to sue Naperville Yard for, and waive, any claims, demands, actions, causes of action, debts, damages, losses, costs, fees, expenses or any other alleged liabilities or obligations of any kind or nature, whether known or unknown (collectively, "Claims" for any Injuries to me and my children in the Use of Naperville Yard Premises and Services which arise out of, result from, or are caused by any NEGLIGENCE OF NAPERVILLE YARD, ME, my children, and/or Others (collectively "Negligence Claims").

If I, on my own behalf or on behalf of another (including an estate) assert a Negligence Claim against Naperville Yard and/or breach my agreement not to sue Naperville Yard, I will pay all reasonable fees (including attorneys' fees), costs and expenses incurred by Naperville Yard or its insurers ("Naperville Yard's Fees and Costs") to defend (1) the Negligence Claims and (2) all other Claims based on the same facts as the Negligence Claims(s). I also agree to defend, indemnify and hold Naperville Yard harmless to the fullest extent permitted by law from and against any Claim (including any Negligence Claims) asserted against Naperville Yard by any other person arising out of, resulting from, or caused by the Use of Naperville Yard Premises and Services by me or my children. My agreement to defend Naperville Yard means that I will pay all of Naperville Yard's Fees and Costs incurred to defend the Claim from the date the Claim is asserted. My agreement to indemnify and hold Naperville Yard harmless means that I will pay any settlement, judgment, or other damages, fees, or costs of any type incurred by Naperville Yard to resolve the Claim.

Consent: I, the undersigned parent or guardian/participant, do hereby grant authority to the staff at Naperville Yard to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize Naperville Yard Corporation and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional materials or team films.

I HAVE READ, UNDERSTAND, AND AGREE TO ALL TERMS AND CONDITIONS OF THIS AGREEMENT, INCLUDING SPECIFICALLY THE ASSUMPTION OF RISK, WAIVER OF LIABILITY, AND DEFENSE AND INDEMNIFICATION PROVISIONS UNDER WHICH I AM RELINQUISHING LEGAL RIGHTS.

Participants Full Name (Print):

Parent Signature:

Child's First and Last Name: _____

BEFORE & AFTER CAMP CARE

For an additional fee, before and after camp care is available for all athletes through the Naperville Yard After School Sports FUN Camp*

- **Before Care: 6:30am-9:00am** **Fee: \$10/day** (Breakfast available before 8am)
- **After Care: 3:30pm-6:30pm** **Fee: \$15/day**

COMPLETED REGISTRATION FORMS REQUIRED TO ATTEND BEFORE OR AFTER CAMP CARE

Before a child may be admitted to After School Sports FUN Camp, parent(s)/ guardian(s) must turn in the following registration forms to the After School Sports Director:

- After School Sports Enrollment Packet
- Copy of child's birth certificate
- Copy of child's latest physical and immunization record



PLEASE SELECT THE DAY(S) YOU REQUIRE BEFORE OR AFTER CARE FOR YOUR CHILD

| Week of | Sport | | M | T | W | TH | F | FULL WEEK | Paid Amnt. (Office Use Only) | Paid Date (Office Use Only) |
|-------------|----------------------|----|---|---|---|----|---|-----------|------------------------------|-----------------------------|
| June 3rd | Multi-Sport | BC | | | | | | | | |
| | | AC | | | | | | | | |
| June 10th | Soccer | BC | | | | | | | | |
| | | AC | | | | | | | | |
| June 17th | Multi-Sport | BC | | | | | | | | |
| | | AC | | | | | | | | |
| June 24th | Soccer | BC | | | | | | | | |
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| July 1st* | Multi-Sport (*3 day) | BC | | | | | | | | |
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| August 5th | Soccer | BC | | | | | | | | |
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| August 12th | Soccer | BC | | | | | | | | |
| | | AC | | | | | | | | |