

ABOUT HBC SPRING TENNIS CAMP 2010

Our camp mission is to provide an active, educational and fun tennis camp for your children.

Harbor Bay Club offers a safe and healthy environment for kids to play and learn. Each camper will meet new and old friends and participate in a variety of tennis activities. Your child will have the opportunity to focus on skill development, teambuilding, cooperation, goal setting, and basic motor coordination. Our professionals have created a unique sports oriented recreational program, where your child will learn independence skills, problem solving, and internal motivation. Give your child a tennis camp they will always remember!

**AT TENNIS CAMP, EVERYONE'S
A WINNER!!!**

Harbor Bay Club
200 Packet Landing Rd.
Alameda Ca.
(510) 521-5414
(510) 521-5535 (FAX)
www.harborbayclub.com



WAIVER

I, the undersigned, certify that I am the legal Parent/ Guardian of named participant, and that he/she has my permission to participate in this activity.

I agree to assume full responsibility for any injuries incurred by him/her in connection with this activity.

Should a medical emergency arise, the Parent/Guardian will be notified immediately. If the undersigned is not available for consultation, permission is granted for the Harbor Bay Club Staff to obtain medical treatment as deemed necessary.

Furthermore, the undersigned understands that all damages caused by the above named minor shall be paid by the minor or the undersigned to owner(s) of damaged item(s). Undersigned also realizes that he/she will be contacted immediately if the minor fails to comply with acceptable rules of conduct.

The undersigned, in consideration of participation in this activity, agrees to indemnify and hold Harbor Bay Club harmless and release its offices, employees and agents from any liability for any injury arising out of or in any way connected with participation in this activity. I further understand that Harbor Bay Club does not carry medical insurance.

I have read and understand the policies and conditions of this agreement and signify my agreement and approval with my signature

SIGNATURE OF PARENT/GUARDIAN

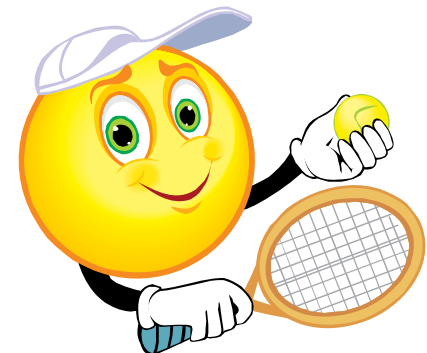
For additional information please call
Mike Bauer at 521-5416 ext. 126

Harbor Bay Club

2010 Spring Jr. Tennis Camp

With

Mike Bauer



April 5-9th

SPRING TENNIS CAMP FEES

ALL FEES ARE PAYABLE IN ADVANCE

Full Week: 10:00am — 3:00pm
\$220.00/ Member
\$250.00/ Non-member

10% Early Bird Discount for Full Week only.
Discount deadline: March 15, 2010.

10% Multiple Sibling Discount available.

Half Day Week: 10:00am — 12:00pm
\$130.00/ Member
\$150.00/ Non-member

Day: 10:00am — 3:00pm
\$60.00/ Member
\$70.00/ Non-member

CAMP WILL GO ON RAIN OR SHINE!

LUNCH

HBC will furnish lunch for an additional charge of \$25.00 per week. Daily participants are charged \$5.00 per day.

EXTENDED CARE

Extended Care will be available from 9:00-10:00am and 3:00 – 5:00pm in the Café. The cost is \$5.00/hour per child. Please contact Tennis/Activities Coordinator, Andy Tupman, at 521-5416 ext. 131 to reserve your child(ren) a spot.

REFUND POLICY

Campers canceling with at least 30 days notice will receive a refund less a \$25.00 non-refundable deposit.

Cancellations made with 14 – 30 days notice will receive a 50% refund. Cancellations made with less than 14 days notice will receive **NO REFUND**.

We do not offer make-up days or refunds for unused days in a week. This includes, but is not limited to vacations and illness.

If we cancel the camp due to lack of attendance then you will be refunded 100%.

HARBOR BAY CLUB EMERGENCY FORM

Parent(s)/Guardian Name _____

If not available, in an emergency please notify:

Name _____

Relationship _____

Phone (h) _____ (w) _____

Cell(s) _____

Physician _____

Phone#: _____

Dentist _____

Phone#: _____

Health Insurance Carrier _____

My child is on a normal schedule of
Immunizations Yes / No

Allergies/other health or medical
considerations (please be specific)

PICTURE WAIVER

From time to time HBC may desire to use a picture of your child captured during Camp. We will not publish your child's name in conjunction with the picture.

Please check the box if you do not want your child's picture used.

How did you hear about Tennis camp?
Member? _____ Return Camper _____
Other _____

APPLICATION

Child's Name _____

Age _____

Address _____

City _____ State _____ Zip _____

Phone (h) _____ (w) _____

Pager, cell phone _____

Email _____

Child's Member # _____ Non-Member _____

**Please note that child(ren) must have HBC membership to qualify for the Member Rate.*

FULL Session.....\$ _____

10% off before 3/15/10 \$ _____

Multiple Sibling 10% off \$ _____

Subtotal \$ _____

HALF Session.....\$ _____

DAILY (circle dates: April 5 , 6 , 7 , 8 , 9)

of Day _____ X \$ _____ = \$ _____

Lunch (\$25/week OR \$5/day) \$ _____

Camp Total \$ _____

METHOD OF PAYMENT

Check #: _____ HBC Account #: _____

Credit Card # _____

Expiration Date: _____