



About HBC Junior Tennis Camp

We are planning an exciting summer of fun tennis and healthy exercise. The camp will involve your kids in tennis drills, games and activities. Emphasis will be on fundamentals, including rules, sportsmanship, etiquette, proper technique and consistency in hitting the ball. Campers will further develop each of the major tennis strokes and play tennis matches. Players will be divided by ability.

Tennis Camp HBC's mission is to provide an active educational and fun tennis camp for your children with focus on:

- Team Tennis
- Games
- Friendships
- Strategy
- Agility
- Drills
- Wednesday Swim
- Teamwork
- Sportsmanship
- Competition
- Stroke Technique

HBC Tennis Camp Fees

All fees are payable in advance

Full-Day Week Camps: 9:00am-3:00pm

Tennis Members: \$305 (wk of 7/4 \$244)

Fitness Members & Non-Members:
\$340 (wk of 7/4 \$272)

10% discount for siblings

Half-Day Week Camps: 9:00am-12:00pm

Tennis Members: \$190 (wk of 7/4 \$152)

Fitness Members & Non-Members:
\$225 (wk of 7/4 \$180)

10% discount for siblings

Remember to bring your lunch, or you can take advantage of our Box Lunch Program!

HBC offers Camp lunches for \$32.5 per week (see application to select weeks lunch is desired). Lunches consist of a sandwich, chips, fruit, cookie and a beverage. *Please do not choose our lunch program if your child has allergies or special dietary needs.*

Extended Care

Extended Care is available before Tennis Camp Monday thru Friday from 8:00am to 9:00am and after Tennis Camp from 3:00pm to 6:30pm. Drop off in the morning must be before 8:45am. Enrolling in Extended Care on this application is for full weeks only (mornings & evenings). Although, you can still sign up for Morning or Afternoon care, please ask. Choose each week that Extended Care is needed. Drop In's will be charged each day by the Extended Care staff (\$20 in AM and \$30 in PM). Any children not picked up by 3:10pm will be taken to Extended Care in the Clubhouse and charged accordingly.

Refund Policy

Campers canceling with at least 30 days **WRITTEN** notice will receive a refund less a \$25 non-refundable deposit (per child per week of camp). Cancellations made with 14-30 days **WRITTEN** notice will receive a 50% refund. Cancellations made with less than 14 days notice will receive **NO REFUND**.

Prices are per week. 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. **ALL CANCELLATIONS MUST BE DONE IN WRITING.** If we cancel the camp due to lack of attendance then you will be



HBC 2018

For Boys & Girls Ages 6—16

A fun and educational camp for beginners and experienced tennis players alike!



**HARBOR
BAY
CLUB**

Alameda's Premier Health Club & Spa

200 Packet Landing Rd Alameda, CA

(510) 521-5414 x131

HBC Junior Tennis Camp - 2018 Application

Child's Name: _____ Grade Completed: _____
 Birth Date: _____
 Address: _____
 City: _____ Zip: _____
 Phone: _____
 Cell: _____ Work: _____
 Home: _____ Alt: _____
 Child's HBC Member # _____ NM
 Parent's Name: _____
 Email: _____

Method of Payment

Check#: _____ HBC Account#: _____ exp: _____
 Credit Card#: _____ exp: _____
 Permission to store payment info.
 Non-Members must have billing information on file.

All Tennis Camp enrollees must be 6 years or older and must be on HBC Tennis Membership to qualify for the Tennis Member Rate.

Tennis Camp Session Dates	Full Day		Half Day		** 10% OFF	Extended Care M-F	Extended Care M-F	Lunch M-F	Week Total
	TM	FM/ NM	TM	FM/ NM					
1) 6/11—6/15	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
2) 6/18—6/22	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
3) 6/25—6/29	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
4) 7/2—7/6**	\$244	\$272	\$152	\$180	\$ _____	\$28	\$60	\$26	\$ _____
5) 7/9—7/13	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
6) 7/16—7/20	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
7) 7/23—7/27	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
8) 7/30—8/3	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
9) 8/6—8/10	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____
10) 8/13—17	\$305	\$340	\$190	\$225	\$ _____	\$35	\$75	\$32.5	\$ _____

* Circle ALL that apply for each week, enter discount amount and each week's total.

** no Camp July on 4th

** (10% discount for 2 or more siblings or signs up for 3 or more weeks)

TM: Tennis Member / FM: Fitness Member / NM: Non-Member

Tennis Camp Total

\$ _____

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.

I understand that I may be called on to pick up my child if my child behaves in any way that is unsafe to my child's well being or another child's well being.

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.

T-Shirt Size

S ___ M ___ L ___ M ___ L ___

(Children's Sizes) (Adult Sizes)

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 this box if you do not want your child's picture used.

Harbor Bay Club Emergency Information

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

HBC Membership # _____
 Child's Name _____
 Parent (s)/Guardian Name _____

if not available, in an emergency please notify:

Name _____
 Relationship _____
 Phone (h) _____ (w) _____
 Cell phone _____

Physician _____
 Phone _____
 Dentist _____
 Phone _____
 Health Insurance Carrier & # _____

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

HBC Junior Tennis Camp Sessions

- Week 1 6/11—6/15
- Week 2 6/18—6/22
- Week 3 6/25—6/29
- Week 4 7/2—7/6 (no 4th)
- Week 5 7/9—7/13
- Week 6 7/16—7/20
- Week 7 7/23—7/27
- Week 8 7/30—8/3
- Week 9 8/6—8/10
- Week 10 8/13—8/17

No Camp on July 4th

Permission for Medical Treatment

In case of emergency or accident, if I am not available, I authorize the staff of Harbor Bay Club to seek medical treatment for my child at my expense.

Signed _____
 Date _____

It is the responsibility of parents to update the above information as changes occur.

How did you hear about HBC Junior Tennis Camp? Member? _____ Return Camper? _____ Other? _____