

## CAMP MSC 2010

Dear Parents,

I can't believe it is that time of year again. Here at MSC we look forward to summer camp! Every year we try to make your child's experience better than the year before. We want your child to have a blast while they are here! Your child will make friends and participate in a variety of activities that are not only fun, but promote health and fitness. Some of these activities are: swimming, gymnastics, basketball, volleyball, soccer, flag football, games... Additionally, your child will learn about teamwork, encouragement, and respect.

Our camp will be 10 weeks beginning May 24th – July 30th (an additional week may be offered from August 2<sup>nd</sup> – August 6th, depending on the school calendar). Children ages 4-12 years old are welcome. A \$50.00 deposit is required for each week attending. Our hours will be 9:00 a.m. to 3:00 p.m.; before care will be available from 7:00 a.m. -9:00 a.m. and aftercare will be available 3:00 p.m.-6:00 p.m.

Your child has the option of bringing a lunch each day or hot lunches may be purchased from our café. Daily lunch specials include: hot dogs, hamburgers, po-boys, pizza... Camp menu will be posted on the website.

We are looking forward to working with your child this summer!! **REGISTER NOW.** The weeks fill up quickly. **EARLY BIRD SPECIAL** will be available through March 31<sup>st</sup>. Anyone attending 6 or more weeks of camp will be put in a drawing for the chance to win 1 **FREE WEEK** of summer camp.

Please do not hesitate to call if you have any questions, or visit our website for additional gym information and other programs offered.



Sincerely,

Pam Broussard, BS,ED; RN  
Executive Director

Chris Broussard  
Assistant Director

**SUMMER CAMP  
MANDEVILLE SPORTS COMPLEX  
INFORMATION:**

Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Grade in Fall 2008 \_\_\_\_\_ School: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Health Insurance: \_\_\_\_\_ Ins. ID #: \_\_\_\_\_ Group: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Mother's Employment: \_\_\_\_\_ Father's Employment: \_\_\_\_\_

Home Telephone # \_\_\_\_\_

Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell#: \_\_\_\_\_

**Email Address:** \_\_\_\_\_

Camper lives with \_\_\_\_\_ Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Other  
If parents are divorced, who has legal custody of the child? \_\_\_\_\_

Additional Emergency Contact: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

**FEES & SCHEDULE:**

7:00 a.m. - 9:00 a.m.- \$ 10.00 per week for before care

3:00 p.m. - 6:00 p.m.- \$ 25.00 per week for after care

9:00 a.m. - 3:00 p.m. - \$ 150.00 per week Includes camp, field trips and t-shirts (2). (\$5.00 discount for siblings)  
\$ 25.00 weekly lunch rate (includes daily lunch special, drink and chips/fruit snack).

**REQUIRED FEES:** (Please submit appropriate fees with registration forms)

\_\_\_\_\_ \$ 60.00 non-refundable registration fee for Non-Members of Fitness Club or After School Care.  
(This fee includes 2 camp T-Shirts)

\_\_\_\_\_ \$50.00 deposit per week attending camp

(FEES FOR ADDITIONAL WEEKS ARE DUE AND PAYABLE IN ADVANCE ON MONDAY OF EACH WEEK. PLEASE INCLUDE YOUR CHILD'S NAME ON EACH PAYMENT.)

Your child will be required to wear his or her camp T-Shirt each day. Please check size for shirts:

\_\_\_\_\_ SM 6-8 \_\_\_\_\_ MED 10-12 \_\_\_\_\_ LG 14-16 \_\_\_\_\_ XL 18-20 \_\_\_\_\_ Other

(Additional shirts may be purchased for \$10.00 \_\_\_\_\_ extra shirts @\$10.00= \$\_\_\_\_\_)

**Please sign on the line indicating that you are reserving the week(s) your child will be attending camp. Please remember that you will be responsible for payment of each week reserving. Additional weeks can be added subject to availability.**

Week 0:     John Doe     Example

Week 1: \_\_\_\_\_ May 24 – May 28                      Week 6: \_\_\_\_\_ June 28 – July 2

Week 2: \_\_\_\_\_ May 31 – June 4                      Week 7: \_\_\_\_\_ July 5 – July 9

Week 3: \_\_\_\_\_ June 7 – June 11                      Week 8: \_\_\_\_\_ July 12 – July 16

Week 4: \_\_\_\_\_ June 14 – June 18                      Week 9: \_\_\_\_\_ July 19 – July 23

Week 5: \_\_\_\_\_ June 21 – June 25                      Week 10: \_\_\_\_\_ July 26 – July 30

Bonus Week 11: \_\_\_\_\_ August 2 – August 6  
(depending on school calendar)

**If you reserve a date, you are obligating yourself to pay the total charges for the week reserved and will be billed accordingly. Please understand that we are hiring staff to accommodate our weekly numbers, and that when you reserve a date, you are holding a spot that we could have given to another person and we will incur a loss.**

**A \$25.00 fee will be charged on all returned payments. Payments that are past due over sixty (60) days will be turned over to a collection agency. I also agree to pay any fees or expenses MSC incurs in collecting any balance due on my account, including attorney’s fees, collection agency fees and cost of collection.**

**I have read and understand the contract that I am signing, and understand that if I commit to a week, I will be obligated to pay whether my child attends camp or not.**

\_\_\_\_\_  
PARENT’S SIGNATURE

\_\_\_\_\_  
DATE

MANDEVILLE SPORTS COMPLEX  
SUMMER CAMP 2010

**Field Trip Permission Slip**

I hereby give my permission for my child, \_\_\_\_\_, to participate in a field trip to the following place(s). I understand the field trips are optional and attendance by my child is not required, although all children who attend camp on field trip days must go on the field trip.

My child also has my permission to ride on transportation provided by Mandeville Sports Complex and/or the St. Tammany Parish Public School Bus Transportation. I understand that all campers participating in these field trips will be responsible in conduct to the driver and to camp counselors and/or chaperones at all times.

I understand all field trips will begin and end at the gym.

|          |                        |  |
|----------|------------------------|--|
| Week 1:  | May 26 <sup>th</sup>   | Honey Island Swamp Tour                                      |
| Week 2:  | June 2 <sup>nd</sup>   | St. Tammany Arena  |
| Week 3:  | June 9 <sup>th</sup>   | Audubon Zoo  |
| Week 4:  | June 16 <sup>th</sup>  | Global Wildlife  |
| Week 5:  | June 23 <sup>rd</sup>  | Toy Story Movie - Hollywood Theatre                          |
| Week 6:  | June 30 <sup>th</sup>  | In House Fun - Rock Climbing Wall, Inflatables and Snowballs |
| Week 7:  | July 7 <sup>th</sup>   | Tiffany Bowling Lanes  |
| Week 8:  | July 14 <sup>th</sup>  | Kids & Family Arena  |
| Week 9:  | July 21 <sup>st</sup>  | Universal Adventure  |
| Week 10: | July 28 <sup>th</sup>  | IMAX/Aquarium  |
| Week 11: | August 4 <sup>th</sup> | Bonus Week - In House Fun                                    |

**Authorization To Treat A Minor**

In the event I cannot be reached in an emergency, I hereby give permission to the gym staff to secure proper treatment for my child and give permission to the physician to the selected by the gym staff to treat my child. I further agree that, in the event of an accident, illness or any other circumstance requiring medical treatment, such treatment may be procured for my son/daughter without financial obligation to Mandeville Sports Complex.

I hereby give my child permission to participate in the above described activity.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Emergency Telephone Numbers

\_\_\_\_\_  
Emergency Telephone Numbers

\_\_\_\_\_  
Allergies to Drugs or Food

**WAIVER AND RELEASE OF LIABILITY**

DISCLAIMER: MANDEVILLE SPORTS COMPLEX, INC. IS NOT RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON WHILE PRACTICING, TRAINING, TAKING CLASS, COMPETING, PARTICIPATING IN OPEN GYM, SUMMER CAMP ACTIVITIES, SPECIAL EVENTS, DEMONSTRATIONS, OR SHOWS, OR IN ANY OTHER WAY INVOLVED IN GYMNASTICS, CHEERLEADING, PRESCHOOL, OR TEAMS AT MANDEVILLE SPORTS COMPLEX, INC. FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF MANDEVILLE SPORTS COMPLEX, INC. ITS OWNERS, OFFICERS, AGENTS, OR EMPLOYEES.

In consideration of my participation, I hereby release and covenant not-to-sue MANDEVILLE SPORTS COMPLEX, INC. the MANDEVILLE SPORTS COMPLEX, INC. Board of Directors and officers, the MANDEVILLE SPORTS COMPLEX, INC. Booster Club, and any of their employees, teachers, coaches, or agents, from any and all present and future claims resulting from ordinary negligence on the part of MANDEVILLE SPORTS COMPLEX, INC. or others listed for property damage, personal injury, or wrongful death, arising as a result of my engaging in or receiving instruction in gymnastics, cheerleading or any other activities or any activities incidental thereto, wherever, whenever, however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family, estate, heirs, or assigns.

Further, I am aware that gymnastics and cheerleading are vigorous sporting activities involving height and rotation in an unique environment and as such they pose a risk of injury. I understand that gymnastics, cheerleading, and related activities always involve certain risks, including but not limited to, death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and serious injury to virtually all bones, joints, muscles, and internal organs, and that the mats, pits, and other safety equipment and apparatus provided for my protection, including the active participation of a coach or teacher who will spot or assist in the performance of certain skills, may be inadequate to prevent serious injury. The risk of harm may be limited by all of the safety equipment and trained coaches, but never eliminated. I understand that participation in gymnastics and related activities involves activities incidental to active participation in gymnastics, including moving from event to event, conditioning, stretching and other activities which may leave me vulnerable to the reckless actions of other participants who may not have complete control over their actions or who may not see other students in the gym. I am voluntarily participating in this activity with knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, personal injury, or death.

I further agree to indemnify and hold harmless MANDEVILLE SPORTS COMPLEX, INC. and all others listed for any and all claims arising as a result of my engaging in or receiving instruction in MANDEVILLE SPORTS COMPLEX, INC. activities incidental thereto, whenever, wherever, or however the same may occur.

I further authorize MANDEVILLE SPORTS COMPLEX to use photographs of my child for promotional purposes.

I understand that this waiver is intended to be as broad and as inclusive a permitted by the laws of the state of Louisiana and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be within the state of Louisiana.

I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing this for, I am giving up legal rights and or remedies which may be available to me for the ordinary negligence of MANDEVILLE SPORTS COMPLEX, INC. or any person listed above.

Child's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_