

**2018 Lindero Kids Summer Sports Camp**  
 5719 Lake Lindero Drive/ Agoura Hills, CA 91301 818-889-1158 ext. 107  
 Online Registration is Also Available at [www.lindero.com](http://www.lindero.com)

Family Last Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address (Street): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

(City/Zip): \_\_\_\_\_

Contact Email: \_\_\_\_\_  Please add me to the Camp e-mail list

Camper 1 (Full Name): \_\_\_\_\_

Age \_\_\_\_\_

Enroll my child in the following activities (circle one activity for each week): Place my child with: \_\_\_\_\_

Week 1 June 18 - 22	Sunshiners	Golf Academy	Golf	Tennis	Week 6 July 23 - 27	Sunshiners	Golf Academy	Golf	Tennis
Week 2 June 25 - 29	Sunshiners	Golf Academy	Golf	Tennis	Week 7 July 30 - Aug 3	Sunshiners	Golf Academy	Golf	Tennis
Week 3 July 2 & 3 Only*	Sunshiners	Golf Academy	Golf	Tennis	Week 8 Aug 6 - 10	Sunshiners	Golf Academy	Golf	Tennis
Week 4 July 9 - 13	Sunshiners	Golf Academy	Golf	Tennis	Week 9 Aug 13 - 17	Sunshiners	Golf Academy	Golf	Tennis
Week 5 July 16 - 20	Sunshiners	Golf Academy	Golf	Tennis					

Camper 2 (Full Name): \_\_\_\_\_

Age \_\_\_\_\_

Enroll my child in the following activities (circle one activity for each week): Place my child with: \_\_\_\_\_

Week 1 June 18 - 22	Sunshiners	Golf Academy	Golf	Tennis	Week 6 July 23 - 27	Sunshiners	Golf Academy	Golf	Tennis
Week 2 June 25 - 29	Sunshiners	Golf Academy	Golf	Tennis	Week 7 July 30 - Aug 3	Sunshiners	Golf Academy	Golf	Tennis
Week 3 July 2 & 3 Only*	Sunshiners	Golf Academy	Golf	Tennis	Week 8 Aug 6 - 10	Sunshiners	Golf Academy	Golf	Tennis
Week 4 July 9 - 13	Sunshiners	Golf Academy	Golf	Tennis	Week 9 Aug 13 - 17	Sunshiners	Golf Academy	Golf	Tennis
Week 5 July 16 - 20	Sunshiners	Golf Academy	Golf	Tennis					

\*Week 3(4th of July week) - Monday & Tuesday Only

**Camp Fees First Week (applies to each Camper):**

Sunshiners (4 - 6 years old)	\$280
Golf & Tennis Campers (7 years and older)	\$280
Golf Academy (7 years and older)	\$300

**\*Week 3**

\$112	<b>Child 1</b>	\$ _____
\$112	<b>Child 2</b>	\$ _____
\$120		

**Camp Fees Additional Weeks:**

Sunshiners (4 - 6 years old)	\$252	\$101
Golf & Tennis Campers (7 years and older)	\$252	\$101
Golf Academy (7 years and older)	\$270	\$108

**Discounts:**

**Deduct 5% for LCC/HOA Members**

**Subtotal** \$ \_\_\_\_\_

**Deduct 10% with 4 or more total camp weeks**

**Early Bird - Deduct 10% before May 15, 2018 and 5% on or before June 1, 2018**

- Applicable if paid in full at time of registration (applies to total weeks paid inclusive of all Campers)

- Discounts may not be combined and do not apply to Pre-care or Post-care

-See following page for terms and conditions regarding discounts

**Total Discounts** \$ \_\_\_\_\_

**Daycare (available for all ages):**

July 4th Week

Pre-care included with camp week			
Post-care 3:30-6pm	\$40	\$16	<b>Post-care</b> \$ _____

➔ Monday (day of) sign-ups add a \$10 processing fee \$ \_\_\_\_\_

**Total Camp and Daycare Fees** \$ \_\_\_\_\_

**Amount Paid** \$ \_\_\_\_\_

Conditions Of Enrollment / Medical Information

Emergency Contact and Medical Information

Full Name of Child 1: \_\_\_\_\_ List any Medical Issues/Conditions or Allergies: \_\_\_\_\_

Full Name of Child 2: \_\_\_\_\_ List any Medical Issues/Conditions or Allergies: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Group/Policy Number: \_\_\_\_\_ Office Use Only:

Terms and Conditions

Payments/Discounts

- A 10% discount applies if paid before May 15, 2018 and 5% on or before June 1, 2018
• A \$10 processing fee will be charged for Monday (day-of) registrations.
• There will be a \$30 returned check fee.
• Make checks payable to "GPL".

Cancellations/Refunds

- Refunds must be requested in writing 7 full days prior to scheduled week. A \$75 processing fee per child will be withheld.
• Due to staffing commitments, we will be unable to issue a refund if requested less than 7 full days prior to scheduled week.
• Refunds requested less than 7 full days prior to scheduled week due to medical issues will be considered by Club Management and decisions are final. Any refunds will be issued after September 1, 2018.

Withdrawals

- Lindero Country Club Kid's Summer Sports Camp reserves the right to dismiss any Camper whose conduct is dangerous, illegal or, at the discretion of the Camp Director, is detrimental to the Camp and/or other Campers.

Hold Harmless

I agree that:

- If any accident, injury or illness occurs, our family insurance will be the only source of payment and I will not hold Lindero Country Club or any of its staff financially or legally responsible.
• There is no provision for accident or medical insurance coverage or compensation for Campers.
• My Camper may participate in any and all activities related to the Lindero Kid's Summer Sports Camp and that I assume all risks incidental to such participation including, but not limited to, golf, driving range, tennis, soccer, boating, basketball, games, crafts, swimming and other sports and transportation due to medical emergency.
• I waive, release and hold harmless the Lindero Country, LLHOA, Golf Projects Lindero (GPL) and all organizers, directors, and counselors, including in the failure to administer prescription medications.
• Camp staff is not responsible for administering medications and I will notify Camp staff of all my child's physical conditions.

Personal Belongings

- Lindero Country Club is not responsible for any personal belongings lost, stolen or damaged. I understand that Lindero Country Club discourages bringing electronic games, phones or other expensive belongings.

By signing this form I acknowledge that I have read, understand and agree to all terms and conditions.

Parent/Guardian Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Payment Method:

- Cash  Check (Payable to "GPL")  Visa  MasterCard  Charge to my Member/HOA Account

If paying by Credit Card:

Name on Card \_\_\_\_\_
Card Number \_\_\_\_\_
Expiration Date \_\_\_\_\_
Authorized Signature \_\_\_\_\_

Authorized Payment Amount: \$ \_\_\_\_\_

If charging to Member/HOA Account:

Member Name/Acct. # \_\_\_\_\_
Authorized Signature \_\_\_\_\_

Lindero Country Club Tax ID # 95-4493364. Keep this number for your tax deduction.