



Star Hill

Family Athletic Center

2011 Summer Recreation Program Registration Form



Please fill out one form per camper

First Name _____
 Last Name _____
 Date of Birth _____ Age _____
 Address _____
 City _____
 State _____ Zip _____
 Primary Phone _____
 Cell Phone _____
 E-mail _____

Summer 2011 Schedule

Please indicate week(s) child will be attending camp and if you want to sign up for swimming lessons during each week.

		Camp	Swimming Lessons
Week 1	6/20 – 6/24	_____	_____
Week 2	6/27 – 7/01	_____	_____
Week 3	7/05 – 7/08	_____	_____
Week 4	7/11 – 7/15	_____	_____
Week 5	7/18 – 7/22	_____	_____
Week 6	7/25 – 7/29	_____	_____
Week 7	8/01 – 8/05	_____	_____
Week 8	8/08 – 8/12	_____	_____
Week 9	8/15 – 8/19	_____	_____
Week 10	8/22 – 8/26	_____	_____
Week 11	8/29 – 9/02	_____	_____

Camp will be closed Monday, July 4th

We will have our field trip schedule finalized shortly. Fee structure for weeks including a field trip may change.

Swim Lesson Level _____

Required Deposit (non-refundable)

Full Summer Commitment (members & non-members)
 = \$100/camper
 1-8 week commitments (members & non-members)
 = 1 week payment

Star Hill Members – Rates & Payment Options

- ✓ Full Summer Commitment: \$150/week with 2 week allowance for vacation or Star Hill specialty camp
- ✓ Single week commitment: \$195/week
- ✓ 10% sibling discount avail to full summer commitments
- ✓ Payments accepted weekly

Non-Members – Rates & Payment Options

- ✓ Full Summer Commitment: \$170/week with 2 week allowance for vacation or Star Hill specialty camp
- ✓ Single week commitment: \$215/week
- ✓ 10% sibling discount avail to full summer commitments
- ✓ Payments accepted weekly

Participation Waiver:

In participating at Star Hill Family Athletic Center, participant/parent/guardian understands that he/she will be using Star Hill Family Athletic Center and the facilities and does so at his/her own risk. Star Hill Family Athletic Center and its owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which occur in or about any programs on the premises, he/she does hereby fully and forever release discharged hold harmless Star Hill Family Athletic Center, all associated facilities and its owner, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by Star Hill Family Athletic Center. Failure to do so may result in suspension from participation.

Consent: I the parent, guardian, or participant by signing do hereby grant authority to the staff at Star Hill Family Athletic Center 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 Star Hill Family Athletic Center 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.

Print Name _____
 Signature (Parent/Guardian) _____

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