

West End Racquet and Health Club 4343 Spencer St. Torrance, CA 90503 Phone: (310) 542-7373 Email: westendclb@aol.com

#### **Registration Information**

Parent or Guardian Name				
Address				
Telephones	Home	Work		Cell
First Child			Age	Gender
Second Child			Age	Gender
Third Child			Age	Gender
Email Address			I	
How Did You Hear About the Program?			Name of The School Your Child Attends	

### Multi Jurisdictional Authorization and Release for Medical and Dental Treatment

Doc	tor	P	hone

MEDICAL INSURANCE COMPANY...... Policy Number.

Please specify any medical problems: allergies, past operations or treatment of serious illness:.....

Specify allergic reactions to medications

I hereby grant permission for my child to use all the play equipment and participate in all the activities of the WESC program. I hereby grant permission for my child to be included in pictures connected to the WESC program and the West End Club.

and/or foods:....

The undersigned, as the parent(s), or legal guardian(s), of the above-named person, (the "minor") hereby authorize the West End Club and its employees, and directors to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care (collectively "medical care") to be rendered to the minor under the general or special supervision and upon the advice of a physician or surgeon licensed under the laws of the state or other jurisdiction in which medical care is sought, and to consent to any x-ray, anesthetic, dental or surgical diagnosis or treatment and hospital care (collectively "dental care") to be rendered to the minor by a dentist licensed under the laws of the state or other jurisdiction in which dental care is sought.

The undersigned understand and agree that West End Racquet and Health Club shall not be legally or financially liable for any bill or medical expense incurred, or for any cause of action or claim arising from any medical care or dental care provided, or the lack of medical care or dental care. The undersigned hereby agree to indemnify, defend, and hold the West End Club harmless from any claim made by or on behalf of the minor person or the minor's heirs or parents or guardians arising out of any medical care or dental care or dental care provided.

\*\*West End Club reserves the right to deny any entrance and / or continuation of camp to any child who is unruly and / or does not respect the rules of West End Club and the Jr. Sports Camp program. \*\*

# \*I have read/completed and agree to all the above. Initial......

\*Sign full name to represent your signature and acknowledge that the terms above been accepted.

SIGNED...... DATE.....



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### West End Sports Camp (WESC)

Please check appropriate boxes from the list below:

- □ Members \$380 per week
- □ Non-Members \$420 per week
- □ Daily Rate \$150 per child
- □ Before/After Care \$16 per hour
- □ Group Swim lessons \$70 per week

## **Swim Ability Assessment for Minor**

Please check appropriate circle:

- o Does not know how to swim (Must provide Foam Floaties)
- $\circ$  Comfortable only in kids' pool. (From 2' 4' Deep)
- Comfortable in deep water. (From 3'- 7' Deep)

Please mark the weeks that your child will be attending. NO CANCELLATION OR REFUND. Initial......

> Deadline to register is Thursday by 4pm the week before camp starts. Please complete our form and email it to westendclb@aol.com

Week	Dates	Week \$	Swim lesson \$	Total \$
1	06/10-06/14			
2	06/17-06/21			
3	06/24-06/28			
**4	07/01-07/05			
5	07/08-07/12			
6	07/15-07/19			
7	07/22-07/26			
8	07/29-08/02			
9	08/05-08/09			
10	08/12-08/16			
11	08/19-08/23			

\*\*WEEK 4 \$50 OFF/ JULY THURSDAY JULY 4TH NO CAMP

#### **Credit Card Information**

 Please fill out the form and check the specific weeks and enclose a check or write your credit card number below along with its expiration date.

 Name on The Credit Card.

 Credit Card Number.

 Credit Card Number.



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## **Emergency Contact Information**

Week #(s):	
Child's Full Name:	
Mother's Name:	
Phone:	
Father's Name:	
Phone:	
i nono.	
Emergency	
Contact	
Full Name:	
Relation:	
Phone:	

**Does your child take any medications?** YES / NO If Yes, please list:

**Does your child have allergies?** YES / NO If Yes, please list:

#### **Before/After Care**

Full Name:	
Week #:	
Monday:	
Tuesday:	
Tuesday: Wednesday: Thursday:	
Thursday:	
Friday:	
Total Hours:	

For Before/After care we must have credit card on file.



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### **Parent Information Sheet**

Get your child involved in a program that's fun and rewarding. West End is a Junior Sports Camp for children ages 5-11 years.

\*Please read

CAMP HOURS:	Monday-Friday: 9am-3pm <b>Drop off/Pick up Location:</b> At the end of the parking lot the door closes at 9:25am and opens at 2:45pm. For scheduled Late drop off and early pickup please use our main entrance.
BEFORE/AFTER CARE:	Before care is provided from 8:00am-9am and after care is from 3pm-6pm; it is \$15/hour per child. All before/after care will be totaled and charged at the end of the week (cc# on file is required).
ACTIVITIES:	Campers participate in several sports throughout the club including tennis, pickleball, basketball, swimming, dodgeball, and kickball. For the younger camper, we offer arts and crafts as well.
RATIO:	The campers are divided by age. Campers are always well supervised throughout the club. Ratio is 14 campers to 2 counselors. Age groups are 5-6, 7-8, 9-11
SWIMMING:	Open swimming is held Monday - Friday for one hour. Camp staff, as well as a certified lifeguard will supervise campers while in the pool. Younger children, with less swimming experience, will stay in the smaller pool (2'-4'deep). <b>Parents are responsible to inform</b> <b>the camp director if their camper has any limitations (i.e.</b> <b>can/cannot swim or uncomfortable in pool)</b> ; the camp staff will follow these limitations to the best of their ability.
GROUP SWIM LESSONS:	Held during scheduled open swim time, for half an hour Monday- Thursday with our swim instructor. Monday we will assess swim ability and group them based on their level. \$70 per child, per week.
TENNIS:	Campers will participate in one hour of tennis instruction which is held Monday thru Thursday. This is group instruction; children are split among tennis courts and taught by a West End USPTA Tennis Pro.



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LUNCH AND<br/>SNACKS:West End provides lunch and snack for your child daily. Snacks<br/>include chips and fruit. Lunches vary each day. Your child may<br/>bring his/her own lunch (no peanut butter, no Nuts). Water is easily<br/>accessible to campers and provided daily.<br/>\*Mondays<br/>\*Mondays<br/>Chicken nuggets or grilled cheese<br/>\*Tuesdays Hot Dog or grilled cheese<br/>\*Wednesdays Hot Dog or grilled cheese<br/>\*Thursdays<br/>Kac and cheese or grilled cheese<br/>\*Fridays

TARDINESS/Campers are to be signed into camp between 8:45am to 9:00amABSENTEEISM:each morning. If your child will be late or absent from the camp, as<br/>a courtesy, we ask you to please contact West End front desk<br/>(310)542-7373. They will relay the message to the camp director.<br/>We ask you to please consider the other children in the camp and<br/>keep your child home if he/she is not feeling well.<br/>For early pickup you must notify the camp director a night before.

WHAT TO SEND<br/>WITH YOURCampers should wear comfortable,<br/>play clothes.Sport shoes (not crocs),<br/>and<br/>play clothes.CHILD:Sandals are only permitted at the pool area. Send your child with<br/>the following LABELED items daily:

Reusable water bottle

- Backpack
- Spray Sunscreen
- Swimsuit
- Towel
- Hat
- Tennis racquet (if he/she has one)
- LOST ANDWest End Racquet and Health Club assumes no responsibility forFOUND:Iost or stolen items, please label all belongings with permanent<br/>marker. If something is misplaced, check the camps lost and found<br/>bucket or front desk lost and found. Unclaimed and found articles<br/>will be discarded at the end of each week.

Please do not send any Nuts, Peanuts or Tree nuts with your child. Thank you!!



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## Waiver/Medical Authorization

#### WAIVER FOR DESPENSING OF MEDICATION

It is required by West End Racquet and Health Club Sports Camp (WESC), as a conditi prescription medication, that the medication be authorized by a physician, dentist, or other is understood that prescription medication is administered solely at the request of and as a the undersigned parent/guardian.	licensed prescriber. It
I/We request that	
Receive	
Name and dosage of medication	
For the period from to at	
Date Time(s)	
Physician's description of any anticipated reaction of child to the medications.	
I/We give permission for the above names student to be dispensed medication at camp for authorization to give medication at camp form has been approved. I/We understand that W Health Club Sports Camp (WESC) does not have medical personnel on staff to assist in the medication and that medication will be dispensed by the camp staff, I/we understand West Health Club Sports Camp (WESC) will not and cannot assess the need for, or assume any the administration of any medication. I/We understand that the administration of any medic injury, which ranges from minor to catastrophic and that it is impossible to eliminate such ri knowledge, I/we release West End Racquet and Health Club Sports Camp (WESC) and ea agents, and representatives from all liabilities, claims, and demands for injury or loss that I/	Vest End Racquet and e administration of End Racquet and risks associated with, ation involves a risk of sks. Despite this ach of its employees,

student may now or in the future have, resulting from the dispensing and/or administration of medication at camp or any disclosure relating to medication administered. The prescription medication must be brought to camp in the original container appropriately labeled by the pharmacy or physician, stating the name of the student, the medication, and dosage.

Parent/Guardian Signature

EMERGENCY CONTACT: \_

Name

Phone



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# <u>Daily Camp Activates</u> <u>Subject to change: Due to wheatear and kids count.</u>

Kids are grouped by age

- Group two 9-11 Years old
- Group three 7-8 Years old
- Group four 5-6 Years old

We rotate our sports between our groups

• <u>9-9:30am</u>

Activity for all groups in center court

9:30-10:30am

Sport activity (dodge ball, kickball, soccer and flag football)

- <u>10:30-11am</u> Snack
- <u>11-12pm</u> Tennis for all except 5-6 years old swimming
- <u>12:00-12:30pm</u> Lunch for all
- <u>12:40-1:40pm</u> Girl's swimming Boys Pickleball 5-6 Years old Tennis
- <u>1:40-2:40pm</u> Boy's swimming Girls Pickleball
- <u>2:45pm</u> Change and home ☺

Fridays are chill day  $\odot$  some will enjoy movie & some will play dodge ball or basketball. Swim time will remain the same.