



2014 SPRING ADVENTURE DAY CAMPS



Allred, Harper, Polster Branches: April 7 - 11

Griset Branch: April 7 - 18

Ages 5 to 13

LIT Program ages 14-15

Adventure Day Camp Rates:

Daily Rate - \$35 or ALL 5 Days - \$150 / LIT Program Daily Rate \$15

- | | | | |
|------------------------|--|---------------------------------------|--|
| Polster Day Camp: | <input type="checkbox"/> Early/Late Care | <input type="checkbox"/> 5 Day Option | Single Day Option: <input type="checkbox"/> 4/7 <input type="checkbox"/> 4/8 <input type="checkbox"/> 4/9 <input type="checkbox"/> 4/10 <input type="checkbox"/> 4/11 |
| Allred Day Camp: | <input type="checkbox"/> Early/Late Care | <input type="checkbox"/> 5 Day Option | Single Day Option: <input type="checkbox"/> 4/7 <input type="checkbox"/> 4/8 <input type="checkbox"/> 4/9 <input type="checkbox"/> 4/10 <input type="checkbox"/> 4/11 |
| Griset Day Camp: | <input type="checkbox"/> Early/Late Care | <input type="checkbox"/> 5 Day Option | Single Day Option: <input type="checkbox"/> 4/7 <input type="checkbox"/> 4/8 <input type="checkbox"/> 4/9 <input type="checkbox"/> 4/10 <input type="checkbox"/> 4/11 |
| | <input type="checkbox"/> Early/Late Care | <input type="checkbox"/> 5 Day Option | Single Day Option: <input type="checkbox"/> 4/14 <input type="checkbox"/> 4/15 <input type="checkbox"/> 4/16 <input type="checkbox"/> 4/17 <input type="checkbox"/> 4/18 |
| Harper Day Camp: | <input type="checkbox"/> Early/Late Care | <input type="checkbox"/> 5 Day Option | Single Day Option: <input type="checkbox"/> 4/7 <input type="checkbox"/> 4/8 <input type="checkbox"/> 4/9 <input type="checkbox"/> 4/10 <input type="checkbox"/> 4/11 |
| LIT Program (\$15/day) | <input type="checkbox"/> Early/Late Care | Location: _____ | Single Day Option: <input type="checkbox"/> 4/7 <input type="checkbox"/> 4/8 <input type="checkbox"/> 4/9 <input type="checkbox"/> 4/10 <input type="checkbox"/> 4/11 |

*LIT Program is for ages 14-15.

Camper Name (Last, First): _____

M ___ F ___ DOB: _____ Home Phone: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

E-mail Address: _____

Parent Name: _____ Cell Phone Number: _____

Parent Name: _____ Cell Phone Number: _____

Emergency Contact (If parent is unavailable): _____ Phone #: _____

Medical Conditions/Allergies: _____

METHOD OF PAYMENT— PLEASE COMPLETE APPROPRIATE BOXES

*Financial Assistance is available. Financial Aid packet must be filled out completely and submitted at least 5 business days prior to camp start date. Please submit F/A forms to camp office located at the Polster Branch or to your local branch Clubhouse Manager.

<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	<p>Field Trip/Lunch Options:</p> <input type="checkbox"/> Movies 4/8 - \$15 <input type="checkbox"/> Pizza Lunch 4/11 - \$5 <input type="checkbox"/> Pizza Lunch 4/18 - \$5 (Griset) <p>Camp Fees:</p> <input type="checkbox"/> Daily \$35 x _____ <input type="checkbox"/> 5 Days \$150 <input type="checkbox"/> LIT Daily \$15 x _____	Total Due - \$ _____
For Payment by Credit Card: Card Holder's Name: _____		
Credit Card# _____		
Expiration Date: _____		

The undersigned understands and accepts the BGC San Diego Ground Rules. (Please read reverse side.)

Signature _____ Date _____

OFFICE USE ONLY
Received by: _____
Input Date: _____

BOYS & GIRLS CLUBS OF SAN DIEGUITO (BGC San Dieguito)
ADVENTURE CAMP GROUND RULES

1. Normal camp attire consists of clothing suitable for outdoor play. Open toed shoes are not recommended as campers participate in physical activity while at camp. Hat and sunscreen are highly recommended.
2. **All fees must be paid in advance. A 10% cancellation fee will be assessed for any camps/camp days cancelled on or before April 4, 2014. There is a \$25 charge on all returned checks.**
3. **There will be no refund of any kind after April 4th, 2014.**
4. Any camper found stealing at BGC San Dieguito, on a field trip or outing will be dismissed immediately.
5. BGC reserves the right to dismiss a camper without advance notice for non-payment, or other reason deemed valid by the Camp Director. There are no refunds.
6. The BGC San Dieguito is not responsible for lost or stolen articles.
7. Any camper not attending a scheduled camp day must notify the camp office in advance by 7:30 am the day of the absence and will be credited with a make up day within that camp session. (Subject to availability)
8. Due to strict schedules, the buses/vans cannot wait for tardy campers. Credit is not given for a camper missing a bus/van.
9. All camper days must be taken during the 2014 Spring Adventure Day Camps Session.
10. BGC San Dieguito reserves the right to bill parents for any damages a camper might cause either at camp, on a camp field trip, or to a camp operated vehicle.
11. BGC San Dieguito reserves the right to adjust activities, dates and times within the program.
12. BGC San Dieguito reserves the right to use any photos or videos taken during the camp session for promotional needs.
13. It is the responsibility of each camper's parents or guardian to provide him or her with a nourishing lunch clearly labeled with his or her name. On field trips to some of the major amusement parks, campers should carry enough money to purchase their lunch, since it is the policy of these operations to prohibit sack lunches.
14. I agree that my child can use BGC San Dieguito computers. (Please note that all computers are firewalled against inappropriate sites.)
15. I hereby give permission to my child to become a member of the BGC San Dieguito.
16. I hereby give my consent for the BGC San Dieguito member named above to participate in off site events and field trips.
17. In an emergency, the undersigned authorize BGC San Dieguito to obtain the services of such doctor, hospital, dentist or others as BGC San Dieguito shall determine for the benefit of the BGC San Dieguito member named above. The undersigned shall reimburse the BGC San Dieguito for all expenses incurred in connection with said emergency. The undersigned hereby waive any and all claims they may have against BGC San Dieguito relating to medical, hospital, surgical and dental care furnished to the BGC San Dieguito member named above pursuant to this agreement and agree to hold BGC San Dieguito free and harmless from all claims that the BGC San Dieguito member, the undersigned and others may have in relation to emergency treatment and services rendered pursuant to this agreement. This authorization shall remain in effect until revoked in writing and delivered to agent of BGC San Dieguito.

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