

# CHAMPIONS

## DAY CAMP at Lakeway Resort and Spa

### **Information about enrolling for the 2010 sessions.**

We're excited your camper will be joining us in 2010 for Champions Day Camp Islands of Adventure! It's going to be amazing! This packet includes all the forms necessary for your child to attend camp. To secure your child's spot in a session we need:

- 1) A completed application & waiver.
- 2) A \$53 payment for each session your child is attending. (The 2nd, 3rd, ect siblings' payment should be \$40 for each session) Please call if you have questions about total payments due.

**Please make checks out to "Lakeway Resort".**

You can make your payment over the phone with a credit card by calling the camp office number below. Each camper must have their own completed application. Please read through all the information on the back of the application, and please make sure the session(s) you wish your child to attend are marked clearly on the right side of the application.

This information can be sent to:

Champions Day Camp  
101 Lakeway Dr  
Lakeway, TX 78734

You will be sent confirmation of your child's enrollment in their sessions, as well as any other information as their session approaches.

If you are staying at the Lakeway Resort, and wish to make a reservation, you can call or email Faye, and we'll hold your child's spot in a camp session.

If you have any questions please call or email Faye Sager (Camp Director) at:

512-261-7353

fsager@campchampions.com

Get excited for camp!

# CHAMPIONS

## DAY CAMP at Lakeway Resort and Spa Mini-Journey Application

### Camper Information

Name \_\_\_\_\_ Boy Girl  
Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Camper's # of years at Champions Day Camp \_\_\_\_\_  
For hotel guests only: Hotel room number \_\_\_\_\_ Charge camp fees to room? Yes No  
Are there any activities the camper should NOT participate in: No Yes \_\_\_\_\_  
Allergies: None Yes \_\_\_\_\_  
Medical or Behavior Conditions: None Yes \_\_\_\_\_  
Medications: None Yes \_\_\_\_\_

### Family Information

Camper's Home Address: \_\_\_\_\_  
City State Zip  
Family Email Address: \_\_\_\_\_  
Parent's Names: \_\_\_\_\_  
Cell Phone # ( ) \_\_\_\_\_  
Cell Phone # ( ) \_\_\_\_\_

### Medical Release

I understand that no accident or medical insurance is provided with any activity while my child is at camp.  
In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to secure and administer treatment, including hospitalization for my child as well as exchanging medical information with a third-party health care provider.

Initial of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### Required Approval and Signature

I APPROVE this application and all conditions stated, and hereby certify that my child is of good moral character.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### Mini-Journey Sessions

#### 1st: Check Date(s)

##### March:

- 12<sup>th</sup> & 13<sup>th</sup>  
 19<sup>th</sup> & 20<sup>th</sup>

##### June:

- 4<sup>th</sup> & 5<sup>th</sup>  
 11<sup>th</sup> & 12<sup>th</sup>  
 18<sup>th</sup> & 19<sup>th</sup>  
 25<sup>th</sup> & 26<sup>th</sup>

##### August:

- 6<sup>th</sup> & 7<sup>th</sup>  
 13<sup>th</sup> & 14<sup>th</sup>  
 20<sup>th</sup> & 21<sup>st</sup>  
 27<sup>th</sup> & 28<sup>th</sup>

##### May:

- 28<sup>th</sup> & 29<sup>th</sup>  
 31<sup>st</sup> \*

##### July:

- 2<sup>nd</sup> & 3<sup>rd</sup>  
 9<sup>th</sup> & 10<sup>th</sup>  
 16<sup>th</sup> & 17<sup>th</sup>  
 23<sup>rd</sup> & 24<sup>th</sup>  
 30<sup>th</sup> & 31<sup>st</sup>

##### September:

- 3<sup>rd</sup> & 4<sup>th</sup>  
 6<sup>th</sup> \*

#### 2nd: Check Time(s)

##### Friday

- 9am - 1pm  
 1pm - 5pm  
 5pm - 9pm

##### Monday\*

- 9am - 1pm  
 1pm - 5pm

##### Saturday

- 9am - 1pm  
 1pm - 5pm  
 5pm - 9pm

\* Monday sessions are only available on  
May 31<sup>st</sup> and September 6<sup>th</sup>

# Champions Day Camp Enrollment Policies for Mini-Journey Sessions

## Reservation/Cancellation Information

Reservations are encouraged to ensure your child a spot in a session. Please make reservations 24 hours prior to the start of a session to ensure availability.

Champions Day Camp reserves the right to cancel sessions if enrollment numbers do not meet minimum numbers for a session. Cancellation decisions will be made 12 hours prior to the start of a Mini-Journey session. If a cancellation is made, all payments will be returned.

## Absence/Withdrawal/Dismissal Policy

Champions Day Camp retains the right to dismiss any camper during their session for conduct that is detrimental in any way to other members of the camp community. Champions Day Camp will make **no refunds due to dismissal for disciplinary reasons**. Champions Day Camp will also make no refunds or tuition deductions for absences or early withdrawal from the program, unless it is due to medical reasons.

If a camper must withdraw due to medical reasons, the session fees will be prorated. A note from a medical professional will be required for withdrawal due to medical reasons to receive a refund.

## Custody Issues

Please inform the camp director of any pertinent custody information you may have. We understand that it can be a sensitive subject, however, it is important for the safety of your child.

## **Champions Day Camp at Lakeway Resort 2010 WAIVER**

### **To the Parents or Guardians of Campers at Champions Day Camp:**

Please read this document carefully and feel free to ask questions about this waiver before you sign.

This document must be signed by a parent or guardian of visitors who are minors or wards before they are allowed to participate in Champions Day Camp. By signing this agreement, certain legal rights are surrendered in the event of an injury or other loss to the visitor. Adult visitors and Parents or Guardians (together, referred to as "Parents") of minor visitors and wards (together, referred to as "minors") sign to reflect their agreement, for themselves and for their minor child or ward, to all the terms of this document.

In consideration of the opportunity to visit Champions Day Camp and have access to its grounds, buildings, facilities, services and/or activities, I, the undersigned adult visitor and/or parent or guardian of a visitor who is a minor or ward hereby acknowledge and agree as follows:

### **Activities and Risks:**

Visitors, depending on the nature of their visit, may be involved in a variety of activities, including, but not limited to, swimming, boating, hiking, field trips off-site, special events, sports and a climbing wall. The environment of Champions Day Camp, including its rugged terrain, waterfront, and natural and man-made structures can cause harm. In addition, there may be other risks involved in the program including, the use of certain Camp facilities and equipment, travel provided to off-site trips, travel in vehicles around property, off-site visits, and the services of Champions Day Camp staff, all of which include the possibility of harm or loss to a visitor.

The risks of a visit to Champions Day Camp, whatever the activities, and whether or not supervised, can cause loss or damage to property, personal injury and, in extraordinary cases, even death. These risks are inherent in a visit to Champions Day Camp, and without them the visit would lose its appeal, value and purpose. Visitors are at Champions Day Camp at their own risk, and except for its gross negligence and intentionally wrongful conduct, Champions Day Camp is not responsible for any loss, which a visitor may suffer while at Champions Day Camp.

### **Assumption of Risks, Release and Indemnity:**

For myself and, if my minor child or ward is a visitor, on behalf of the minor or ward, I agree as follows:

**1) I acknowledge and assume all risks** of my, or the minor's, visit to Champions Day Camp, whatever the nature of those risks may be, inherent or not and whether or not described above. If a minor child or ward of mine is the visitor, I have discussed the risks with him or her, and he or she understand and accepts them.

**2) I release Champions Day Camp, Lakeway Resort, Camp Champions, and BFC LLC II**, its owners, officers, directors, staff and contractors (“Release Parties”) from, and agree not to sue them for, any claim which I or the minor may have for injury, death or other loss incurred during or in any way related to my or the minor’s visit to Champions Day Camp.

**3) I agree to indemnify** (that is, to defend and protect, including by paying liabilities, costs and attorney fees) Release Parties from any and all claims which I, the minor, a member of my or the minor’s family, another visitor or any other person, may have for any injury, death or other loss incurred by or caused by me or the minor, related in any way to my or the minor’s visit to Champions Day Camp. This acknowledgment and assumption of risks and agreements of release and indemnity include losses and claims arising in whole or part from negligence, but not the gross negligence or intentionally wrongful conduct, of a Release Party.

**Other:**

Any dispute which I or the minor or ward may have with Champions Day Camp or another Release Party will be submitted to mediation, if not otherwise resolved; and any mediation or suit shall occur exclusively in Travis County, Texas, and be governed by the substantive laws (but not the laws which might apply those of another jurisdiction) of the State of Texas. If any part of this agreement is deemed unenforceable by a Court or other appropriate authority, the remainder of the agreement shall remain in force and effect.

Champions Day Camp is hereby authorized to use, without compensation, photographic, including video, images of me, or the child or ward for promotional or other purposes.

**Initial please**\_\_\_\_\_

**Required Approval and Signature:**

By signing this waiver, the Parents or Guardians of minor visitors and wards reflect their agreement, for themselves and for their minor child or ward, to all the terms of this document.

\_\_\_\_\_  
Signature of Parents or Guardians of Minor or Ward

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please print Parent or Guardian’s name

\_\_\_\_\_  
Please print Camper’s name