

# BTF SUMMER CAMP REGISTRATION FORM

The Boss Tribe Summer Camp is a camp to help keep the kids active and healthy while allowing them to have fun, learn, and build new friendships. We will have a range of activities that are hands-on, as well as physical. The camp runs from June 24 – July 26 from 8 am – 1 pm. The total fee is \$75/week per child. \*There is an extra fee of \$25 a week for each hour your child must stay at the camp after 1 pm. The latest time for pickup is 4 pm. If your child must stay past 1 pm, but not every day, there is a \$15 hourly fee, until 4 pm.

Point of contact for the summer camp: Carolyn Williams -> (803) 269 – 0206 or [thebosstribenation@gmail.com](mailto:thebosstribenation@gmail.com)

**\*The best way to get in contact with me is to text and/or call me.**

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child's Shirt Size: \_\_\_\_\_

Child's Home Address:

\_\_\_\_\_  
\_\_\_\_\_

Parent/Legal Guardian Name: \_\_\_\_\_

Cell Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Please list any allergies or health concerns that your child has:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any information that I need to know about your child:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Parent/Guardian: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Primary transportation from camp: \_\_\_\_\_

**\*If there is a change in transportation from the camp, please let Carolyn know ahead of time. If not, I will call you before releasing your child to another adult.**

**Can your child be in our videos and/or pictures that will be displayed on the website and/or social media for the camp? Yes \_\_\_\_\_ No \_\_\_\_\_**

**\*Please make sure that all of your child's items that they bring are labeled. Unless they are staying after camp hours, I do not recommend electronics or any other foods/snacks, unless they have a special diet.**

### **Refund/Cancellation Policy**

**\*ALL PAYMENTS ARE NON – REFUNDABLE**

**Camp fees are non-refundable and non-transferable.**

### **Cancellations Due to Medical or Emergency Circumstances**

**In some cases, refunds may be granted after the cancellation and refund period for medical or emergencies circumstances only. A written notice of cancellation with explanation of medical or emergency circumstances must be provided for a refund request to be considered. Additional documentation may be requested by Boss Tribe Fitness. Partial or full refunds for medical or emergency circumstances will be at the discretion of Boss Tribe Fitness after reviewing the request. Refunds in full will be offered for campers or household member who have COVID-19 symptoms, exposure, or a positive test within two weeks of the start of camp session.**

**\*If your child is sick, please keep them home. If they arrive to camp sick, the parent/guardian will be contacted to come and pick them up.**

**\*Payments are to be made the Sunday prior to the start of the camp week. Payments not made on Sundays, will result in your child not being included in the camp for that week. Please contact Carolyn if you have any questions or concerns on prior to camp starting that week. Once your registration form is received and reviewed, you will be sent an invoice for the camp fees. You will have to keep a card on file for the duration of the camp in order for your child to remain in the camp.**

**Thank you! 😊**

## Summer Camp Accident Waiver and Release of Liability Form

I hereby give my permission for my child \_\_\_\_\_ to participate in the BTF Summer Camp Program. I understand that camp activities could include play and outdoor activities around and near the Boss Tribe Fitness/Waterstone grounds. I also understand that outdoor activities may occur outside. I agree to see that my child is appropriately attired for camp activities, and to provide insect repellent and sunscreen for my child to use at camp. I will not expect the Boss Tribe Fitness to provide these items. I give my permission for Boss Tribe Fitness camp leaders to apply or assist with the application of the repellent and sunscreen I provide. In the event of illness, injury, and/or accident, I authorize the camp instructor or any Boss Tribe Fitness employee to act on my behalf. They may approve any and all non-emergency or emergency treatment and are authorized to sign any and all medical release or required form(s) on my behalf. In the event of an emergency, I understand that I will be notified of the situation as soon as practicable. I agree to pay any necessary expenses incurred in the medical treatment of my child, including, but not limited to all transportation costs to and from a medical facility, and, if necessary, transportation to your home or medical facility of choice. I understand that Boss Tribe Fitness may, in its sole discretion, dismiss any camp participant for inappropriate, disrespectful, or dangerous behavior at any time. In this event, I understand that I will not receive a refund of camp fees for unattended days. If my child breaks or damages any property as a result of their direct or indirect behavior, I hereby agree to pay for its repair or replacement. I understand that the risks associated with camp activities could result in injury to my child. I hereby assume these risks and, knowing them, hereby give my child permission to participate. I understand that Boss Tribe Fitness is not liable for any injuries or other occurrences due to indoor and outdoor camp activities or related risks, and/or the actions or omissions of Boss Tribe Fitness camp counselors, volunteers, employees, trustees, directors, officers, or any other entities being released. I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which my child may participate and that it will govern the actions and responsibilities at said activity. In consideration of my application and permitting my child to participate in this activity, I hereby: WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of Boss Tribe Fitness, Waterstone, Carolyn Williams, its trustees, officers, employees, camp counselors, volunteers, entities or other persons released, for my child's death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to them including their traveling to and from this activity; INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the Boss Tribe Fitness, its trustees, officers, employees, volunteers, or other entities or persons released from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise. I understand that while participating in this activity, my child may be photographed. I agree to allow their photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns. The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. Boss Tribe Fitness, its Trustees, directors, officers, and all its employees, acting officially or otherwise are hereby released from any and all claims, demands, actions, or causes of action on account of any injury to my child that may occur. This release binds my heirs, executors, administrators, and/or assigns. I CERTIFY THAT I HAVE READ THIS DOCUMENT, FULLY UNDERSTAND ITS CONTENT, AND AGREE TO ITS TERMS.

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Participant's Printed Name (Please print legibly) Date

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Parent/Guardian Printed Name (Please print legibly) Date

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Parent/Guardian's Signature Date (If under 18 years old, Parent or Guardian must also sign) Date