

2021 WINTER WONDERLAND CAMP INFO PACK & HANDBOOK

IMPORTANT: The last two pages of this handbook, (the medical release form, terms and conditions, and liability form) must be completed, signed and returned to ECCTA, prior to your child's participation in any ECCTA Winter Wonderland Camp program.

Mission Statement

The East County Community Tennis Association (ECCTA) is a 501(c)(3) non-profit organization that promotes the enjoyment and participation of recreational tennis for beginner to advanced players. The Association seeks to educate, encourage, and foster youth as well as adult development in the sport. The ECCTA provides player lists, organizes leagues and tournaments, supports an instructional program, assists in the maintenance of facilities, and provides fun social activities for families in east county San Diego. We are located in the heart of La Mesa and affiliated with Helix Charter High School.

Program Statement

ECCTA looks forward to offering children (ages 5-15) an exciting Winter Wonderland Tennis Camp experience where they will learn, improve, make new friends, and have lots of fun!

Behavior Guidelines and Policy

ECCTA requires behavior that allows all students and staff to perform safely and effectively in a camp setting. To carry out this policy and to establish standards of behavior, the following is necessary:

Camper, parent and staff are responsible for:

- Respecting the authority of the staff.
- Behaving in a manner that does not dispute or interfere with the rights of the other campers and staff.

The parent is responsible for:

- Accepting and respecting the right of the ECCTA to require discipline standards of behavior for all the campers.
- Reviewing the ECCTA rules and regulations with family members to ensure all are familiar and understand the standards of conduct.
- Cooperating with staff in carrying out appropriate discipline techniques when necessary.

The staff is responsible for:

- Reviewing with campers the rules and regulations regarding discipline.
- Establishing an environment with guidelines of appropriate behavior for campers.
- Communicating with campers and parents regarding behavior problems with proposed solutions.

Violation of the ECCTA discipline policy may result in dismissal without financial recourse.

Behavior Expectations of Children:

Please take a few minutes with your child and go over the following basic guidelines and expectations for Camp.

- Do not throw or swing your racquet at anyone.
- Only water will be allowed on the tennis courts.
- Gum is prohibited at camp.
- No sitting or leaning on the nets.
- Shirts and tennis shoes (no black soles) must be worn at all times.
- Proper behavior and language are expected at all times.
- No bicycles, skateboards, shoes with wheels, rollerblades or scooters allowed.
- Bicycles should be properly locked-up outside the front gate.
- Children under 7 years will not be sent by themselves to the restrooms.
- All children **MUST** receive permission from their camp counselor prior to leaving the tennis court area (or any activity) for a bathroom break, or any reason.
- Please help keep your summer camp area neat and clean.
- Always stay within your assigned court area unless otherwise instructed.

Camp Hours

We are currently not offering Early Drop Off or Extra Camp due to **COVID regulations.

Full Day Tennis Camp: 3:30-7:30pm.

CANCEL, DATE CHANGE AND LATE PICK-UP TERMS

Refunds for cancellations prior to December 6 will be allowed, and pay a \$20 Admin Fee. NO Refunds after December 6. Late Registration Fee on/after December 6, will pay a \$50 late registration fee.

Admission Policies and Requirements:

Parents or guardians must complete registration forms prior to the start of camp.

Parents or guardians must complete the ECCTA release form located on the last page of this handbook, prior to the first day of camp. ALL EMERGENCY NUMBERS must be kept up to date. We may only release your children to those persons listed on the information sheet. Please keep us informed of any changes.

Payment Procedures/Enrollment

- Pay with Cash, Check or Venmo Charlie @Charles-Marchesini
- Payment is due prior to the start of camp.
- To reserve a spot, a non-refundable deposit of \$50 must be paid 2 weeks prior to the start of camp, November 29, 2021. Full payment of \$300 must be received one week before camp, December 6, 2021. Siblings who sign up pay a fee of \$250 per participant. Anyone wishing to participate after the December 6, 2021 deadline, must pay \$350, regardless if it is an individual or sibling sign up.

Rain Policy: Camp will be cancelled in the event of rain due to **COVID** regulations.

Lost and Found:

The ECCTA is not responsible for items lost. PLEASE LABEL ALL ITEMS YOU SEND WITH YOUR CHILD (Name & phone#).

Illness

Please notify Shatoo at (619) 820-3640 by text if your child will be absent. ECCTA does not have facilities to care for ill children. NO medications of any kind, prescription or not, will be administered by staff without the necessary information completed on file. Note: Refunds due to illness will be allowed only with a doctor's confirmation, and will still be subject to the \$20 Admin fee.

Dinner/Snack

You are responsible for bringing your own food and drink, **due to COVID, no water can be provided by ECCTA** for the snack break.

What to Bring & Wear (HINT: LABEL EVERYTHING!!!)

Backpack or sports bag to carry his/her belongings

Sweatshirt, Water, Thermos, Racquet will be provided if needed.

IMPORTANT: Please complete both sides of the next page (the medical release form, terms and conditions, and liability form) and return to ECCTA or email complete files to info@firstsurv.com prior to the first day of camp.

LIABILITY RELEASE: Participant Initial _____ Parent/Guardian Initial _____

East County Community Tennis Association, a California non-profit corporation (herein collectively referred to as "ECCTA", provides program(s) ("Activities") including but not limited to tennis, fitness, yoga and other strengthening exercises, etc.

IN CONSIDERATION of being permitted to participate in any way in any "Activity"; I, for myself, as Parent/Guardian of Participant, and/or as Participant, including my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
2. FULLY UNDERSTAND that: (a) any/all athletic activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis, and/or death ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "releases" named below; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I fully accept and assume all such Risks and all responsibility for losses, costs, and damages I incur as a result of my participation or that of the Participant's participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE ECCTA as well as the officers, directors, agents, employees and assigns of each, and the ECCTA coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by ECCTA, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Release's, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

MEDICAL RELEASE: Participant Initial _____ Parent/Guardian Initial _____

I, grant to ECCTA to act as guardians/spokesmen in granting permission for emergency treatment/hospitalization (including anesthesia) if necessary for the Participant, en route to or from or at the site of any "Activity" or hospital or other medical facility. I understand that should a health emergency arise, I will be attempted to be notified, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized. I further understand that I will be responsible for payment of any such medical procedures.

PHOTO/VIDEO RELEASE: Participant Initial _____ Parent/Guardian Initial _____

I hereby authorize ECCTA to allow the reproduction, dissemination, and/or publication of my name and likeness for media coverage, public relations, or any other purpose which may involve the use of photographs, films, and/or video tape recording. This is to be done in conjunction with my participation in an "Activity" or event and I understand and agree that I may neither pay a fee to receive individual promotional consideration from my participation, nor will I receive any payment for the possible commercial use of my name or likeness.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

By signing this form, I agree to the terms and policies set forth in the "2020 WINTER WONDERLAND CAMP INFO PACK & HANDBOOK" including payment requirements, late fees, change fees, and refund terms and limitations.

 PRINTED NAME OF PARTICIPANT SIGNATURE DATE

 PARENT/GUARDIAN SIGNATURE DATE

2021 WINTER WONDERLAND CAMP PERSONAL INFORMATION

Participant Name: _____ DOB: _____

Mother: _____

Father: _____

Cell Ph: _____ Cell _____

Ph: _____ Work Ph: _____

WorkPh: _____

Email: _____

Email: _____ Street Address: _____

The following adults, including those listed above, are allowed to pick up my child:

1) _____

2) _____

3) _____

MEDICAL INFORMATION

Injuries and/or Surgeries (Most severe to minor): _____

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Allergies: _____

Medications: _____

Family Doctor: _____ Phone: _____

Insurance Company: _____ Policy #: _____