

Junior Tennis Camp



ROLLING HILLS CLUB

2023 Weekly Sessions: June 12 - August 11

Ages 8-13

PARTICIPANT INFORMATION: PLEASE FILL OUT A SEPARATE FORM FOR EACH PARTICIPANT ENROLLED. PLEASE PRINT CLEARLY.

PARTICIPANT NAME (LAST) _____ (FIRST) _____

RHC MEMBER _____ GUEST _____:

HOW DID YOU HEAR ABOUT JUNIOR TENNIS CAMP AT RHC?

IS PARTICIPANT A SWIMMER _____

ALLERGIES _____

STOP! PLEASE SIGN THE MEDICAL CONSENT AND RELEASE OF LIABILITY ON REVERSE SIDE.

ENROLLMENT: PLEASE INDICATE THE CAMP(S) IN WHICH THE PARTICIPANT WILL BE ENROLLED.

JUNIOR TENNIS CAMP

9:00am-12:00pm

\$375 per week (\$450 Guest) * (\$300 / \$360 Guests for July 4th week)

June 12 - 16	<input type="checkbox"/> Week	\$ _____
June 19 - 23	<input type="checkbox"/> Week	\$ _____
June 26 - 30	<input type="checkbox"/> Week	\$ _____
July 3 - 7 *	<input type="checkbox"/> Week	\$ _____
July 10 - 14	<input type="checkbox"/> Week	\$ _____
July 17 - 21	<input type="checkbox"/> Week	\$ _____
July 24 - 28	<input type="checkbox"/> Week	\$ _____
July 31 - August 4	<input type="checkbox"/> Week	\$ _____
August 7 - 11	<input type="checkbox"/> Week	\$ _____

. SNACK & LUNCH ARE NOT INCLUDED.

PAYMENT: PLEASE INDICATE TOTAL PAYMENT DUE AND METHOD OF PAYMENT BELOW.

NO REFUNDS.

TOTAL PAYMENT DUE: \$ _____

OFFICE: USE ONLY

CASH CHECK# _____

CHARGE: CREDIT CARD # _____

Exp Date: _____ CW2 Code: _____

Name (As it appears on card) _____

SIGNATURE: _____



For more information, email info@rollinghillsclub.com.

Medical Emergency & Waiver of Liability Form

ROLLING HILLS CLUB

Please submit this form to Membership Services for processing.

RECEIVED BY: _____

DATE: _____

PARTICIPANT NAME (Last, First)		BIRTHDATE (MM/DD/YYYY)	<input type="radio"/> FEMALE	MEMBER _____
			<input type="radio"/> MALE	GUEST _____
PARENT/GUARDIAN NAME* (Last, First) ***REQUIRED if participant under 18 years old**		RELATION		
EMAIL (Parent/Guardian Email if under 18)				
HOME PHONE (Parent/Guardian Phone if under 18)		CELL/WORK/DAYTIME PHONE (Parent/Guardian Phone if under 18)		
STREET ADDRESS (Parent/Guardian Address if under 18)		CITY	STATE	ZIP
SPECIAL HEALTH CONSIDERATIONS, DISABILITIES, MEDICATIONS, FOOD or DRUG ALLERGIES				

EMERGENCY CONTACT (Other than parent, if listed above):		RELATION	EMERGENCY PHONE	

WAIVER: In consideration of permission to use, today and on all future dates, the property, facilities, staff, equipment and services of Rolling Hills Club, I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue Rolling Hills Club, its directors, officers, employees, and agents from liability from any and all claims including the negligence of Rolling Hills Club resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in activities, classes, observation, and use of facilities, premises, or equipment.

ASSUMPTION OF RISKS: I understand that there are risks associated with the participation in activities, classes, observation, and use of facilities, premises, or equipment of Rolling Hills Club such as personal injury, accidents or illnesses (including death), and property loss. I understand these injuries or outcomes may arise from my own or other's actions, inactions, or negligence, or the condition of property, facilities, or equipment at Rolling Hills Club. I have read this paragraph and I know, understand, and appreciate these and other risks that are inherent in my participation in activities, classes, observation, and use of facilities, premises, or equipment of Rolling Hills Club. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

PHOTOGRAPH RELEASE: I give Rolling Hills Club the absolute right and permission to use my photograph in its promotional materials and publicity efforts. I understand that the photographs may be used in a publication, print ad, direct-mail piece, electronic media (e.g., video, CD-ROM, Internet/WWW), or other form of promotion. I release Rolling Hills Club, the photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use.

INDEMNIFICATION AND HOLD HARMLESS: I agree to INDEMNIFY AND HOLD the Rolling Hills Club HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement at Rolling Hills Club and to reimburse them for any such expenses incurred.

SEVERABILITY: I further expressly agree that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

ACKNOWLEDGEMENT OF UNDERSTANDING: I have read this waiver of liability, assumption of risk, photograph release, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, assuming all risks of use, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

NAME (FIRST & LAST, PLEASE PRINT CLEARLY)

SIGNATURE (PARENT/GUARDIAN SIGNATURE, IF A MINOR)

DATE

ENTERED BY:

DATE:

351 San Andreas Drive, Novato, CA 94945

415.897.2185

ROLLING HILLS CLUB

REV 4.2023

www.ROLLINGHILLSCLUB.com