



Welcome to Energy's Summer Camp 2020! Thank you for your interest in signing your child up for our program. It's going to be a great summer!

Enclosed, please find:

- Registration Form
- Camp Selection Form
- Pricing Information
- Medical Information Form
- Liability Waiver
- Camper Release Form
- Policies & Procedures document
- What to Bring to Camp / Typical Daily Schedule

In order to complete your child's enrollment, we will need the following completed items from you:

- Registration Form
- Camp Selection Form
- Liability Waiver
- Medical Information Form
- Immunization record and proof of physical exam
- Camper Release Form

**Registration cannot be completed until we have received all of these required forms from you.** You may fax, mail, or drop off the forms and we will follow up with a phone call or e-mail to confirm receipt and registration status.

Payment is due at the time of registration. Prior to June 1<sup>st</sup>, those paying by credit card will be charged a 50% deposit. The remaining balance is due on June 1<sup>st</sup>, and will be automatically billed to your credit card. For payment by check or those registering after June 1st, payment in full is due with your registration.

Please give us a call with any questions not addressed in this packet. We look forward to sharing the summer with your child!

Sincerely,

*The Energy Summer Camp Team*

70 Jaconnet Street, Newton, MA 02461  
Frontdesknewton@energyfitnessgym.com  
617-795-7177 ph | 617-916-5278 fax | [www.energyfitnessgym.com](http://www.energyfitnessgym.com)

## Energy Fitness & Gymnastics Summer Camp 2020

### Registration Form

<b>Camper's Information</b>	First Name: _____ Last Name: _____ Birthdate: ____ / ____ / ____ Age: ____ Gender: <input type="checkbox"/> M <input type="checkbox"/> F
<b>Parents or Legal Guardian(s)</b>	Name(s): _____ Street Address: _____ Town: _____ State: _____ Zip: _____ Parent #1 phone: _____ Parent #2 phone: _____ E-mail: _____
<b>Emergency Contact Information</b>	Name #1: _____ Relation: _____ Phone: _____ Name #2: _____ Relation: _____ Phone: _____
<b>Billing Information</b>	<input type="checkbox"/> I wish to pay my tuition in full by check. <input type="checkbox"/> I wish to pay by credit card. I understand a 50% deposit will be charged prior to June 1 <sup>st</sup> and the remaining balance will be charged to my card on June 1, 2020.  Cardholder Name: _____ <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard Exp. Date: _____ Card Number: _____-_____-_____-_____ Zip code: _____ (if different from Guardian's address)  <div style="background-color: #e0e0e0; padding: 5px;"> <b>Office Use Only:</b> Date Entered: ____ / ____ / ____ Initials: _____            Amount Paid: \$ _____ <input type="checkbox"/> Credit <input type="checkbox"/> Cash <input type="checkbox"/> Check #: _____         </div>
<b>Policies Confirmation</b>	<b>Please initial the following:</b> _____ I have read, understood, and accept all policies and procedures as outlined in the Energy Summer Camp "Policies & Procedures" document.
<b>How did you hear about us?</b>	<input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Facebook <input type="checkbox"/> Birthday party <input type="checkbox"/> Fundraising event <input type="checkbox"/> Friend <input type="checkbox"/> MassCamp website <input type="checkbox"/> Summer Camp Fair <input type="checkbox"/> Other: _____

## Energy Fitness & Gymnastics NEWTON Summer Camp 2020 Selection Form

Camp Week	Day	9 AM-12 PM Ages 3-12	9 AM-3 PM Ages 4-12	Early drop-off	Lunch Ages 3-12	Late pick-up	Fees
Preschool Camp Ages 3 – 5 June 8 –12	Mon	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Wed	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Thurs	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Fri	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
Preschool Camp Ages 3 - 5 June 15 –19	Mon	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Wed	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Thurs	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Fri	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
Week 1 June 22 – 26	Mon	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Wed	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Thurs	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
	Fri	<input type="checkbox"/> Half Day			<input type="checkbox"/> 12-1 PM		
Week 2 June 29 - July 3	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thu	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 3 July 6 -10	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thurs	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 4 July 13 -17	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thurs	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 4 Xcel July 13 -17	Full Week	n/a	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM		<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
Week 5 July 20 - 24	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thurs	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 5 Xcel July 20 - 24	Full Week	n/a	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM		<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____

## Energy Fitness & Gymnastics NEWTON Summer Camp 2020 Selection Form

Camp Week	Day	9 AM-12 PM Ages 3-12	9 AM-3 PM Ages 4-12	Early drop-off	Lunch Ages 3-12	Late pick-up	Fees
Week 6 Jul 27 - 31	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thurs	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 7 Aug 3 - 7	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thurs	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 8 Aug 10 - 14	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thurs	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 8 Xcel Aug 10 - 14	Full Week	n/a	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM		<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
Week 9 Aug 17 - 21	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Thurs	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Fri	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
Week 9 Xcel Aug 17 - 21	Full Week	n/a	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM		<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
Week 10 Aug 24 - 26 <i>(3-day week)</i>	Mon	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	Camp: \$ _____  Other: \$ _____
	Tues	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	
	Wed	<input type="checkbox"/> Half Day	<input type="checkbox"/> Full Day	<input type="checkbox"/> 8-9 AM	<input type="checkbox"/> 12-1 PM	<input type="checkbox"/> 3-4 PM <input type="checkbox"/> 4-5 PM	

TOTAL AMOUNT DUE: \$ \_\_\_\_\_

# Energy Fitness & Gymnastics NEWTON Summer Camp 2020

## Pricing Information

<b>Half-day fee</b>	5 days*	\$350
(9 AM – 12 PM)	4 days	\$280
	3 days	\$210
	2 days	\$140
	1 day ***	\$70

<b>Full-day fee</b>	5 days**	\$575
(9 AM – 3 PM)	4 days	\$460
	3 days	\$345
	2 days	\$230
	1 day ***	\$115

<b>Early drop-off fee</b>	\$10/day
(8 AM – 9 AM)	

<b>Lunch fee</b>	\$10/day
(12 PM – 1 PM)	

<b>Late pick-up fee</b>	
(3 PM – 4 PM)	\$10/day
(4 PM – 5 PM)	\$10/day

\* Sign up for two full weeks, \$325/week; sign up for three or more full weeks, \$300/week.

\*\* Sign up for two full weeks, \$550/week; sign up for three or more full weeks, \$525/week.

\*\*\* Campers can schedule single days or add single days to their schedule by calling the week prior to check for availability. Single days cannot be added more than 7 days in advance.

**Any week receiving a special promotional discount is not included for multiweek pricing purposes.**

**Sibling Discount Program:** 10% off tuition for the 2<sup>nd</sup> sibling, 15% off for the 3<sup>rd</sup> sibling, and 20% off for the 4<sup>th</sup> sibling if enrolled for the same weeks/days. The sibling discount MAY be combined with the multi-week discount if all siblings are enrolled for the same multiple weeks. It may not be combined with special promotions. Sibling discounts apply to tuition only. Extended care hours are billed at a flat rate per hour.

# Energy Fitness & Gymnastics Summer Camp 2020

## Medical Information Form

**Camper Name:** \_\_\_\_\_

**ENROLLMENT REQUIREMENT:** Each camper **must** provide immunization documentation from their physician and proof of a physical exam within the past year. **All information given is kept strictly confidential.**

Please list all **allergies** (food and medication):

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

Please list any **injuries** that may impact your child's participation in our camp:

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

**Prescription Drugs:** Written physician's directions should accompany any prescription medicines sent to camp for the staff to dispense, and should be in original container, labeled by pharmacist. These directions must include: medication, dosage, frequency, condition being treated, physician's signature, and DEA Number.

Medications: \_\_\_\_\_

**Non-prescription Drugs:** My child may be given non-prescription, over-the-counter medications if their use is clearly warranted (for example, Tylenol, Advil, or antihistamines). Yes [ ] No [ ]

Exceptions: \_\_\_\_\_

**Administration of First Aid:** If needed, the Health Care Supervisor will administer basic first aid to your child.

I understand that I will be contacted as soon as possible in the event that my child is brought to Newton Wellesley Hospital / Metrowest Medical Center for treatment. **If I am not available, please contact:**

Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_  
Home Phone: (    ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (    ) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (    ) \_\_\_\_\_ - \_\_\_\_\_

In the event that I am unavailable for purposes of providing parental consent, I hereby authorize the physician(s) and staff at Newton Wellesley Hospital / MetroWest Medical Center to provide such care that includes diagnostic procedures and medical treatment as necessary to my minor child while said child is enrolled in the Energy Fitness & Gymnastics Camp. I also authorize the release of all x-rays, test results, lab work, or any other procedure that would be helpful in the follow-up care of my child. This medical treatment is to be given to my child without any further prior permission from the undersigned. I understand that the consent and authorization herein granted does not include major surgical procedures. A photostatic copy of this authorization shall be considered as effective and valid as the original.

I, the undersigned, authorize payment of medical benefits to Newton Wellesley Hospital / MetroWest Medical Center for any services furnished to my child by the physician. I understand that I am financially responsible for any amount not covered by my insurance contract. I also authorize you to release to my insurance company information concerning health care, advice, treatment, or supplies provided to my child while attending Energy Fitness & Gymnastics Camp. This information will be used for the purpose of evaluating and administering the claim of benefits. This consent is valid for one year from the date indicated. A photostatic copy of this authorization shall be considered as effective and valid as the original.

In the event of an injury or illness requiring transportation to, an evaluation at, an independent medical facility such as Newton Wellesley Hospital / MetroWest Medical Center, I authorize the release of all medical records generated at that facility to the medical staff or their representatives at Energy Fitness & Gymnastics Camp. I understand that this will enable continuity of care upon the camper's return to the camp and provide staff members a means of informing family members of camper's medical condition. I also understand that such records will remain a confidential and protected part of the camper's general record.

PARENT SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_

# Energy Fitness & Gymnastics NEWTON Summer Camp 2020

## Liability Waiver

Camper Name: \_\_\_\_\_

I/we am aware that in addition to the usual dangers and risks inherent in the sports of Gymnastics, Trampoline, Swimming, Multi-sport Activities, Fitness Training, and other Energy Fitness & Gymnastics Camp Activities, certain additional dangers and risks are present when using Energy Facilities, Gymnastics Equipment, and Trampoline, including, but not limited to, the danger and risk of falling, jumping, and landing. By signing this waiver, I/we freely accept and fully assume responsibility for all such dangers and risks and the possibility of personal injury, death, property damage, or loss resulting therefrom. In consideration of utilizing the Peak Fitness LLC. (dba) Energy Fitness and Gymnastics Camp Facilities, Gymnastics Equipment, and Trampolines, and for other good and valuable consideration, I/we hereby agree as follows:

1. **TO WAIVE ANY AND ALL CLAIMS** for personal injury including death, illness, and/or property damage that I/we may have against Energy Fitness & Gymnastics Camp, Peak Fitness LLC, sports members, their shareholders, members, principals, directors, officers, affiliates, agents, employees, contractors, representatives, and any volunteers in any way associated with Energy Fitness & Gymnastics Camp, Peak Fitness LLC, all of whom are hereinafter collectively referred to as "the Releasees."

2. **TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY** for any loss, damage, injury, death, medical or other expense that I/we may suffer or that any other party may suffer as a result of my use of Energy Fitness & Gymnastics Facilities, Gymnastic Equipment, and Trampoline or in my participation in the Gymnastics, Trampoline, Multi-sport Activities, Swimming, Fitness Training, and other Energy Fitness & Gymnastics Camp Activities, due to any cause whatsoever.

3. **TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES** from any and all liability for any property damage or personal injury to any third party, resulting from my use of Energy Fitness & Gymnastics Facilities, Gymnastic Equipment, and Trampoline or by my participation in the sports of Gymnastics, Trampoline, Swimming, Multi-sport Activities, Fitness Training, and other Energy Fitness & Gymnastics Camp Activities.

4. **THIS RELEASE OF LIABILITY SHALL BE EFFECTIVE AND BINDING** upon my heirs, next of kin, executors, administrators, successors, and assigns in the event of my personal injury including death, illness, and/or property damage.

5. **I/WE ADDITIONALLY AGREE** not to take unreasonable risks while participating in Gymnastics, Trampoline, Multi-sport Activities, Swimming, Fitness Training, and other Energy Camp Activities, including but not limited to attempting skills or tricks that I am not qualified to perform safely or causing any other participants/spectators unreasonable risk of harm.

6. **I/WE ADDITIONALLY AGREE** that I/we shall follow correct safety procedures when using the Energy Fitness & Gymnastics Facilities, Gymnastics Equipment, Fitness Equipment, and Trampoline. I/we also expressly grant to the Camp, and any third party authorized by the Camp, the right to film, videotape, photograph, record my voice and make any reproductions of my physical likeness and voice, and the irrevocable right in perpetuity to use, display, and digitally enhance or alter in any manner, such likeness in any media now known or hereafter devised, including, but not limited to, the exhibition and/or online use, broadcast, theatrically or on television, cable or radio, any motion picture film, video tape, DVD, CD or any Internet service or program in which such likeness may be used or otherwise, or any published articles in which such likeness may be printed, used or incorporated, and in the advertising, exploiting and publicizing of the Camp and Camp products.

7. **I/WE HEREBY CERTIFY THAT I/we am covered by my own Medical Insurance**, and that I/we have read and understand this Release of Liability prior to signing it, and I/we am aware that by signing this Release of Liability I/we am waiving certain legal rights which I/we or my heirs, next of kin, executors, administrators, successors, and assigns may have against the Releasees. Energy Fitness & Gymnastics shall have the right to impose any additional conditions which, in the opinion of the Releasees, will further the intent and legal rights and waivers provided herein. This Liability Waiver was made and executed in the State of Massachusetts and shall be governed by, enforced in, and construed in accordance with the laws of the State of Massachusetts. I/we acknowledge that in executing this Waiver, I/we are not relying on any inducements, promises, or representations made by the Releasees. I am acting on behalf of the camper's other parent in signing this contract and I have authority to bind such other parent to the terms and conditions of this contract on his or her behalf.

8. **PHOTOGRAPHS AND STATEMENTS:** I authorize the use of my own and my child's visual image and statements in newsletters, posters, and other advertising.

PARENT SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_

Print Name Here: \_\_\_\_\_

# Energy Fitness & Gymnastics NEWTON Summer Camp 2020

## Camper Release Form & Sign In/Out

**NAME OF CAMPER** \_\_\_\_\_

Please provide a list of individuals who have permission to pick up your child at the end of the camp day. If an individual who is *not* on this list arrives to pick up your child, we will call you to verify permission. If we are unable to reach you by phone, we will NOT release your child to this person and you will be charged a late pick-up fee. **Please inform any individuals that will be picking up your child that we will ask for photo identification when they arrive for pick-up.**

List of Authorized pick up:	ID Check	Initials
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

### **MONDAY**

Drop off time: \_\_\_\_\_ Initials \_\_\_\_\_

Pick up time: \_\_\_\_\_ Initials \_\_\_\_\_

### **TUESDAY**

Drop off time: \_\_\_\_\_ Initials \_\_\_\_\_

Pick up time: \_\_\_\_\_ Initials \_\_\_\_\_

### **WEDNESDAY**

Drop off time: \_\_\_\_\_ Initials \_\_\_\_\_

Pick up time: \_\_\_\_\_ Initials \_\_\_\_\_

### **THURSDAY**

Drop off time: \_\_\_\_\_ Initials \_\_\_\_\_

Pick up time: \_\_\_\_\_ Initials \_\_\_\_\_

### **FRIDAY**

Drop off time: \_\_\_\_\_ Initials \_\_\_\_\_

Pick up time: \_\_\_\_\_ Initials \_\_\_\_\_



# Energy Fitness & Gymnastics Summer Camp 2020

## Policies & Procedures

**Parents: Please read this document thoroughly as it contains critical information for smooth functioning of our summer camp. Please initial the line on the registration form letting us know that you have read, understood, and accept these policies.**

### Registration Policies

- All registration forms must be filled out completely. Your child cannot be enrolled until we have *all* required forms in-hand. **No exceptions.**
- Up-to-date immunization records and proof of physical exam within the last year must be submitted before we can complete the registration process or your child will not be allowed to participate in our camp. **No exceptions.**
- All students must meet the State-mandated immunization requirements in order to participate in our camp. Refunds will *not* be issued for days missed due to failure to comply with these regulations.
- Any schedule changes/cancellations made with more than 30 days' notice will receive a refund.
- Energy reserves the right to cancel the afternoon session due to low enrollment. Campers will receive one week's notice and will be reimbursed for any cancelled afternoon sessions.

### Single-Day Option

- Pending availability, campers can attend camp for single days if you call the week before you'd like your child to attend. All paperwork must be completed before the camper can register.

### Attendance Policy

- Energy does not offer make-ups, refunds, or credits due to absences.

### Illness

- In the case of a mildly ill camper, Energy has a quiet space where children can rest and be monitored. If the child's condition continues to worsen the parent will be contacted and the child will need to go home.
- Out of respect for fellow campers and their families, campers who were out sick must not have vomited and be fever-free and/or on antibiotics for 24 hours prior to coming back to camp. Also, please refrain from sending campers with an undiagnosed rash or eye infection.
- Please keep campers with a suspected or diagnosed nit or lice infestation home until they have been treated and are lice-free.
- If a child misses camp due to illness, please call the front desk to discuss the possibility of scheduling a make-up day, pending availability. No refunds or credits will be given for days missed due to illness, however.

### Sign-In/Sign-Out

- All campers' guardians must sign their child in at the reception area upon arrival.
- All campers' guardians must sign out before leaving the building at the end of the camp day.

### Camper Pick-up

- All campers will be under the supervision of an instructor until they are released to their designated pick-up person.
- All people other than the parents of the camper will be required to provide identification on their first pick-up day.
- Campers will only be released to their parents or people listed on the Camper Release form.
- If the pick-up person is not listed on your Camper Release form and we are unable to reach you by phone to verify permission for that person to pick up your child, we will *not* release your child to that person and you will be charged a late pick-up fee.
- Pick-up is at 12 p.m. for half-day students and 3 p.m. for full-day students. Please arrive 5 minutes early in order to sign out and gather your child's belongings.
- If parents are more than 15 minutes late in picking up their child, they will be charged a \$10 late pick-up fee.

### Schedule Changes/Cancellations

- Energy considers changes/cancellations to include reduction from full to half-day registration, switching from one day to another, or from one week to another.
- Any schedule changes/cancellations made with less than 14 days' notice will not receive a refund or account credit.
- Any schedule changes/cancellations made with 14 to 30 days' notice will receive an account credit. No refunds will be given.

### Parking for Newton Location

- Parking is limited to the Energy parking lot only and the 15-minute spaces on the street. Parking spots adjacent to the front entrance are restricted to staff members only in order to limit vehicle movement at our entrance, which could be dangerous to those entering or exiting the building. Parking anywhere other than Energy's designated spaces is prohibited and violators will be towed by the City of Newton at their own expense. The 15-minute spaces are for drop-off and pick-up only.

**Potty Training**

- All campers must be fully potty-trained and able to go to the bathroom independently. Diapers and pull-ups may not be worn at summer camp. In the event that a child has an accident that cannot be managed by staff, a parent will be called and expected to return to the gym immediately.

**Preschool Campers**

- Although every effort will be made to acclimate your child to our camp environment, Energy reserves the right to require that preschool campers be picked up if they are inconsolable and unable to participate in our program. Please consider your child's ability to separate from you successfully before enrolling.

**Full-Day Four-Year-Old Campers**

- Before enrolling, please consider whether your four year old has the physical stamina for a full day of gymnastics, and whether they will be comfortable in a mixed-age environment that ranges from 4–14 years.

**Medication**

- ALL campers requiring medication of any kind need to supply: medication, detailed description of medication, directions on how and when to administer medication, and contact information for prescribing physician. A refrigerator is available for medication that must be kept cold.

It is the parent's responsibility to make sure that medication returns home with the child.

**Sunscreen**

- *Please* send all campers with sunscreen already applied, as well as additional sunscreen for reapplication in the afternoon for full-day campers. Staff are not permitted to apply sunscreen to campers. Please label your child's sunscreen bottle with their name.

**Lunch Policy**

- Please refrain from sending any peanut or nut products in your child's lunch in order to limit possible exposure for children with peanut/nut allergies.
- Lunches must be packed in thermal lunchboxes (if they need to be kept cold) and be ready-to-eat. We are unable to provide refrigerator space for lunches or heat up any lunch items.
- Lunch-hint: Kids burn a lot of energy in our program! We encourage people to send healthy, all-natural lunches with a good source of protein included.

**Campers with Allergies**

- We are sensitive to the fact that many children have certain food allergies. While we will do our best to help your child avoid allergenic products in our snacks or craft projects, we cannot guarantee that your child will be free from exposure. Please discuss your child's specific allergy profile with us prior to deciding whether or not to enroll in our summer camp.

**Additional Notes:**

You have the right to request information about our written policies, including: discipline, background checks, health care, and grievance procedure. Energy Fitness & Gymnastics is in compliance for summer camps with the Massachusetts Board of Health, the Newton Health, Fire, and Inspectional Services Departments, and the Natick Health, Fire, and Inspectional Services Departments.

# Energy Fitness & Gymnastics Summer Camp 2020

## What to Bring to Camp

### All campers:

- Special snacks if your child has specific dietary needs. We provide filtered water and snacks such as popcorn, pretzels, goldfish, and graham crackers. We also offer ice-pops as a special treat. If these are not appropriate for your child, please supply alternate snacks and drinks for them.
- A change of clothes in a ziplock bag, in the event of an accident.
- Bathing suit and towel. Please send these items every day for outdoor water play (full- and half-day campers).
- Sunglasses and/or baseball hat (for protection during outdoor play).

### For full-day campers only:

- Lunch (nut-free), packed in a thermal lunchbox.
- Sunscreen, with your child's name clearly marked, for reapplication in the afternoon.

## Typical Daily Schedule

<b>8:00</b>	<b>Early drop-off</b>
9:00–9:05	Drop-off & foam pit play
9:05–9:20	Warm-up
9:20–9:35	Group game
9:35–10:15	Gymnastics rotations
10:15–10:30	Snack
10:30–11:15	Arts & crafts or outdoor games
11:15–11:45	Gymnastics rotations
11:45–11:50	Pit time
11:50–12:00	Cooperative games
<b>12:00</b>	<b>Pick-up for half-day campers</b>
12:00–12:30	Lunch
12:30–1:00	Open gym
<b>1:00</b>	<b>Pick-up for extended lunchtime campers</b>
1:00–1:55	Gymnastics rotations
1:55–2:35	Outdoor games
2:35–2:50	Popsicle break
2:50–3:00	Cooperative games
<b>3:00</b>	<b>Pick-up for full-day campers</b>
3:00–4:00	Crafts, cooperative games
<b>4:00</b>	<b>Late pick-up</b>
4:00–5:00	Free play
<b>5:00</b>	<b>Extended late pick-up</b>