



Summer Camp at Armonk Tennis Club

2023 Application



First Name: _____ Last Name: _____

Gender: _____ Birthdate: _____ Grade in Fall 2023: _____ School: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

Parent/Guardian 1: _____ Work #: _____ Cell #: _____

Parent/Guardian 2: _____ Work #: _____ Cell #: _____

Group Request (List up to 3 Friends): _____

Referred by: _____

T-Shirt Size: Youth S M L Adult S M L XL

Program	Price Per Week (Based on number of weeks enrolling)			6/26 to 6/30	7/05 to 7/07	7/10 to 7/14	7/17 to 7/21	7/24 to 7/28	7/31 to 8/04	8/07 to 8/11	8/14 to 8/18	8/21 to 8/25
Camp Armonk Sports	1 \$775	2-4 \$725	5-7 \$695									
CA Mad Science w/ Sports	1 \$825	2-4 \$775	5-7 \$745									
CA Mad Science w/ Art & Swim	1 \$825	2-4 \$775	5-7 \$745									
CA Mad Science Half Day	1 \$475	2-4 \$450	5-7 \$425									
AITA Junior Camp	1 \$825	2-4 \$775	5-9 \$745									
AITA Advanced Camp*	1 \$825	2-4 \$775	5-9 \$745									
After-Camp Tennis Lesson	\$70 per 30-minute lesson			After-camp lessons can be scheduled with the desk.								
After-Camp Swim Lesson	\$70 per 30-minute lesson			After-camp lessons can be scheduled with the desk.								

* Players must be evaluated and recommended for the Armonk International Tennis Academy Advanced Camp.
 Camp is off Monday, July 3rd and Tuesday, July 4th; registration for the week is 40% off (50% off for AITA Advanced).
 If a box is shaded, registration is closed for that week, but you can call us to check on availability.

Enrollment Discount: w/ Sibling(s) - \$25 per week (\$15 for half day)

A deposit of \$200 per week is required to hold placement: _____ Weeks x \$200 = \$ _____

Charge the deposit to my credit card: MasterCard Visa American Express

Name: _____ Card #: _____ Exp. Date: ____/____/____ Sec. Code: _____

Enclosed is a check for the deposit (payable to **Armonk Tennis Club**)

All balances will be charged in full on April 15, 2023, and cancellations will be non-refundable. Prior to April 15, 2023, payments are refundable, minus a \$150 cancellation fee. Please see release/waiver on following page.





Summer Camp at Armonk Tennis Club

Release & Waiver of Liability



Printed Name of Camper: _____ Birthdate: _____

In consideration of participating in the Summer Camp Program at Armonk Tennis Club, I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "Releasees" named below; and that there may be other risks 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 in the Activity.

I hereby release, discharge, and covenant not to sue Armonk Tennis Associates LLC, SRS Armonk Associates LLC, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (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; 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 Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

As an applicant for participation in recreation programs sponsored by Armonk Tennis Associates LLC (the "Club"), I am aware that the Club does not provide medical insurance in such programs. In the event of an emergency, I hereby grant Armonk Tennis Club permission to give whatever immediate treatment is necessary and/or take my self/child to a hospital emergency room.

Permission is hereby granted to utilize photos and video taken at Armonk Tennis Club as promotional materials.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, 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 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.

Signature of Parent/Guardian: _____ Date: _____

PARENTAL CONSENT

AND I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Signature of Parent/Guardian: _____ Date: _____

POOL AUTHORIZATION

I hereby authorize my child to swim at the Armonk Tennis Club pool.

Signature of Parent/Guardian: _____ Date: _____

SUNSCREEN, INSECT REPELLENT, AND HAND SANITIZER PERMISSION

I allow my child to carry and use topical sunscreen products approved by the Federal Food and Drug Administration for over-the-counter use for the purpose of avoiding overexposure to the sun and not for medical treatment of an injury or illness. I allow my child to be assisted by camp personnel if he/she is unable to physically apply the sunscreen and requests help.

I allow my child to carry and use insect repellent and hand sanitizer. I allow my child to be assisted by camp personnel if he/she is unable to physically apply the repellent or sanitizer and requests help.

Signature of Parent/Guardian: _____ Date: _____

