



Spring Break

Camp at CSA Kids - 2019!



When: April 15th - 19th
Who: Kids Ages 5 - 12 years
Time: 9:00 AM* - 4:00 PM*



What are some of the activities we may do at camp?

- | | |
|----------------------|----------------------|
| ✓ Gym Time | ✓ Open Swim |
| ✓ Ninja Courses | ✓ Social Time |
| ✓ Tramp and Foam Pit | ✓ Outdoor Activities |
| ✓ Arts & Crafts | ✓ Read & Chill Time |
| ✓ Games & Activities | ✓ Make New Friends |

CSA offers flexibility with days and times!

What do you need? You choose your schedule!

- Full Week
- By the Day
- Mornings Only (9:00 AM - 1:00PM)
- Afternoons Only (12:00PM - 4:00PM)
- Add Early Drop Off (7:00 AM - 9:00 AM)*
- Add Late Pick Up (4:00 PM - 5:30 PM)*



Early Bird Discount!



Register by **Friday, March 29th** and save on camp fees!
(Discounts and Rates noted on back of this flyer)

What should you pack for camp each day?

- | | |
|---|---|
| <input type="checkbox"/> Leotard or T-Shirt/Shorts | <input type="checkbox"/> Bagged Lunch, 2 Snacks, & 3 Drinks
(Full Day Campers) |
| <input type="checkbox"/> Swimsuit & Towel | <input type="checkbox"/> Bagged Lunch, 1 Snack & 2 Drinks
(Half Day Campers) |
| <input type="checkbox"/> Tennis Shoes (No Flip-Flops) | |
| <input type="checkbox"/> A Good Book | |

Lets Get Ready to Register!



CSA Kids Spring Break Camp – 2019 Registration

One Form Per Camper

Today's Date: _____ 2019

Camper's Name: _____ F__ M__ D.O.B. __/__/__

Address: _____ City: _____ State: _____ Zip _____

Parent's Name: _____

Phone: Cell () _____ - _____ Home () _____ - _____ Work () _____ - _____

Email: _____

Check off the days you want your child to attend camp in the chart below and check off any additional boxes that apply to the days you need.

Select times you need.	Mon. 15 th	Tue. 16 th	Wed. 17 th	Thu. 18 th	Fri. 19 th	Total Full Days	Early Bird? Y/N
Full Day (9-4)							
Morning Only (9-1)							
Afternoon Only (12-4)							
Add Early D/O (7-9)*							
Add Late P/U (4-5:30)*							

***Please note in boxes under your dates the time you will be D/O early and/or P/U late.**

Early Bird Tuition

Tuition After

½ Day Tuition

Early D/O

Mar. 29th Deadline

Mar. 29th Deadline

9:00-1:00 \$25

Late P/U

1 Day \$32

1 Day \$35

12:00-4:00 \$25

\$4.00 per hour

2 Days \$57

2 Days \$60

3 Days \$87

3 Days \$90

4 Days \$115

4 Days \$120

5 Days \$145

5 Days \$150

Total Full Days: _____ = \$ _____

Total Half Days: _____ X \$25/Day = \$ _____

Total Early D/O & Late P/U: X \$4/Hour = \$ _____

Total Due = \$ _____

Date Paid: _____ 2019

Cash _____ Check # _____

V/MC/Dis. ____/____/____/____

Exp. Date ____/____ Code on back: _____

Signature: _____

Make Check payable to CSA Kids and mail to address on front of flyer.

Assumption of Risk, Waiver of Liability, Promise to Pay, Medical Authorization

I/We recognize that potentially severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion including but not limited to gymnastics, tumbling, trampolines, martial arts, dance, cheerleading swimming, music, preschool and exercise activities. In addition, swimming or any activity in or around water can result in brain damage or drowning. Being fully aware of these dangers, I voluntarily consent to myself or minor child participating in any and all CSA Kids programs, camps and activities and I ACCEPT ALL RISKS associated with that participation.

In consideration for allowing myself or minor child to use these facilities, I, on my own behalf and the behalf of my child and our respective heirs, administrators, executors and successors, here COVENANT NOT TO SUE and FOREVER RELEASE CSA Kids, its officers, directors, shareholders, employees or agents from all liability for any and all damages or injuries suffered by me or my minor child while under the instruction, supervision, or control of CSA Kids including, without limitations, those damages or injuries resulting from act of negligence on the part of its officers, directors, shareholders, employees or agents.

In the event of an accident or emergency I would like myself above or minor child to be taken to a hospital for medical treatment and I hold CSA Kids, and its representatives harmless in this execution of this action. Additionally, I hereby agree to individually provide for all possible future medical expenses which may be incurred by myself or my minor child as a result of any injury sustained while participating at or for CSA Kids.

I have read and understand this ASSUMPTION OF RISK and WAIVER OF LIABILITY, PROMISE TO PAY and MEDICAL AUTHORIZATION and I VOLUNTARILY affix my name in agreement.

Signature

Parent or legal Guardian

Print Name

Date

Medical Marketing Release

For the Medical Release I undersigned gives permission for the CSA Kids officers, employees, and/or agents to seek emergency medical treatment for the participants (s) in the event they are unable to reach any parent or guardian. The undersigned also agrees that they themselves will be responsible for any financial debt incurred by said action. For the **Marketing Release** I understand that my child's likeness may be used in CSA kids ads, promotional videos, our website or various other marketing materials. These images will be used for CSA Kids purposes only and will not be given or sold to outside companies or individuals.

Signature

Parent or legal Guardian

Print Name

Date