

# Mariners Point Golf Camp Medical/Health Form

Dear Parent/Guardian:

In the event of any type of injury or illness, whether life threatening or not, your signature on this form will authorize, in your absence, medical treatment as deemed necessary by a licensed physician/surgeon/dentist. Without your signature, you child will not be allowed to participate in the Mariners Point Golf Camp. Please submit this form on the first day of camp during check-in.

Camper Information	Child #1	Child #2
Child's First and Last Name >>>		
<b>Current Health Conditions:</b>	Please Circle	Please Circle
Epilepsy/Convulsions	Yes No	Yes No
Heart Defect/Disease	Yes No	Yes No
Diabetes	Yes No	Yes No
Bleeding/Clotting	Yes No	Yes No
Asthma	Yes No	Yes No
Please comment on "Yes" answers:		
<b>My Childs Immunities/Vaccinations are Current for:</b>		
Chicken Pox (Varicella)	Yes No	Yes No
MMR (Measles/Mumps/Rubella)	Yes No	Yes No
DPT (Diphtheria/Tetanus/Pertussis)	Yes No	Yes No
HIB (Hip Meningitis)	Yes No	Yes No
Hepatitis B	Yes No	Yes No
Please comment on answers:		
<b>Serious Allergies:</b>		
Life threatening insect sting allergy	Yes No	Yes No
Penicillin	Yes No	Yes No
Other drugs	Yes No	Yes No
Life threatening food allergy	Yes No	Yes No
Other	Yes No	Yes No
Please comment on answers:		
<b>EMERGENCY CONTACT INFORMATION</b>		
Emergency Contact People	Work / Day Phones	Cell Phones
1.		
2.		
3.		
<b>EMERGENCY CONTACT INFORMATION</b>		
I/we give permission to the directors of the Mariners Point Golf Camp to provide & apporve immediate emergency care & transportation should it be required and to administer prescribed medication and routine health care.		
_____	_____	_____
Mother's Signature	Father's Signature	Date

# Conditions of Enrollment

## Release of Liability, Safety, Refund Policy

1. I hereby authorize the directors of the Mariners Point Golf Camp to act for me according to their best judgment in any emergency requiring medical attention. I have no knowledge of any physical impairment that would be affected by the above named camper in participation in the camp program. And I hereby waive and release the Mariners Point Golf Camp from any and all liability for any injuries while at camp.

2. The undersigned parent or guardian consents to the use of any pictures of the camper to be used in advertising or promotion.

3. Mariners Point Golf Camp reserves the right to dismiss any player whose conduct is unsatisfactory. There are certain inherent risks associated with golf. A child will be dismissed from a program for compromising the safety of others. Mariners Point Golf Camp is for well adjusted individuals who treat others with respect and value each player's right to a positive camp experience.

4. Camp Refund Policy: Please give careful consideration prior to enrolling in camp. Camp fees are not refundable. If you cancel on or prior to May 31st your camp fees may be applied to a future Mariners Point Junior Golf Camp during the 2008 or 2009 golf season. The camp credit is transferable to family members or friends. Cash refunds will not be offered.

- Beginning June 1st a \$10 fee will be charged per session for any session date changes made.
- If you need to cancel a session, please call (650) 573-7888 ext: 223 and leave a detailed message or email [dgiordano@marinerspoint.com](mailto:dgiordano@marinerspoint.com)

I accept the terms as stated above in Conditions of Enrollment

\_\_\_\_\_  
Print Minor's Name

\_\_\_\_\_  
Parent or Legal Guardian's Signature

\_\_\_\_\_  
Print Name of Parent or Legal Guardian

\_\_\_\_\_  
Telephone Number

Date: \_\_\_\_\_