

registration form

summer2007



Phone: (650) 573-7888 ext. 2
 Email: rsagara@marinerspoint.com
 www.marinerspoint.com

Parent's Name:	
Address:	
City/Zip:	
Home Phone:	
Mother's Work Phone:	Cell Phone:
Email:	
Father's Work Phone:	Cell Phone:
Email:	
Medical Insurance Company:	Medical I.D. #:
List any physical disabilities including allergies that the instructor should be aware of for instructional modification or emergency:	

Participant's Name	Age	Date of Birth	Camp Date	Session	Fee
<i>Katherine Smith</i>	<i>9</i>	<i>01/02/96</i>	<i>June 12-16</i>	<i>All-Day</i>	\$
<ul style="list-style-type: none"> <li style="width: 33%;"><input type="checkbox"/> June 11-15 <li style="width: 33%;"><input type="checkbox"/> July 9-13 <li style="width: 33%;"><input type="checkbox"/> August 6-10 <li style="width: 33%;"><input type="checkbox"/> June 18-22 <li style="width: 33%;"><input type="checkbox"/> July 16-20 <li style="width: 33%;"><input type="checkbox"/> August 13-17 <li style="width: 33%;"><input type="checkbox"/> June 25-29 <li style="width: 33%;"><input type="checkbox"/> July 23-27 <li style="width: 33%;"><input type="checkbox"/> August 20-24 <li style="width: 33%;"><input type="checkbox"/> July 2-July 6 <li style="width: 33%;"><input type="checkbox"/> July 30-Aug. 3 <li style="width: 33%;"><input type="checkbox"/> August 27-31 	<p style="text-align: right;"><i>Camp Fees Sub Total:</i></p> <p style="text-align: right;"><i>Rental Clubs (\$25 per set)</i></p> <p style="text-align: right;"><i>Optional Lunch fee (\$25 per child)</i></p> <p style="text-align: right;">GRAND TOTAL</p>				
Make checks payable to: Mariners Point , 2401 E. 3rd Avenue, Foster City, CA 94404					
Visa or MC number:			Exp:		

Conditions of Enrollment

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 we deem to be 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.

Camp Refund Policy: Fees are refundable through April 1st (less a \$15 processing fee for every week cancelled). 75% of Camp and Extended Care fees are refundable between April 2nd and May 31st. No refunds for camp and Extended Care fees starting June 1st.

Parent or Guardian Signature

Date