

South Hills Country Club | 2023 Summer Camp Registration Form

Member's Name _____ Member # _____

Relationship to Child: _____

Member's Address _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

LEGAL GAURDIAN _____ Home Phone _____

Cell Phone _____ Email _____

Address _____

Emergency Contact: _____

Name Relationship Number

Circle All That Apply: Session 1 Session 2 Session 3 Session 4(W/Th)

Billed Upon Registration-Fees Non-Refundable after May 15, 2022

Please complete a box for every child attending summer camp. Fee includes two shirts.

Child's First Name _____	Child's Last Name _____		
Date of Birth ____/____/____	M F Age ____ Youth Size ____		
Additional Shirt \$19 Y N			
FULL DAY CAMPER \$395	HALF DAY CAMPER \$355	SINGLE WEEK CAMPER \$150	Week: _____
Child's First Name _____	Child's Last Name _____		
Date of Birth ____/____/____	M F Age ____ Youth Size ____		
Additional Shirt \$19 Y N			
FULL DAY CAMPER \$395	HALF DAY CAMPER \$355	SINGLE WEEK CAMPER \$150	Week: _____
Child's First Name _____	Child's Last Name _____		
Date of Birth ____/____/____	M F Age ____ Youth Size ____		
Additional Shirt \$19 Y N			
FULL DAY CAMPER \$395	HALF DAY CAMPER \$355	SINGLE WEEK CAMPER \$150	Week: _____

Medical Release Form

In the event of an illness or injury where neither parent/guardian is available. I grant permission to South Hills Country Club Personnel to authorize and obtain medical care from any licensed physician, hospital or medical clinic for my child/children listed in the boxes above.

Signature Parent/Guardian Print Parent/ Guardian Name Date

Insurance: ----- Doctor: ----- Phone-----

Photograph or Videotape Permission Slip

____ Yes, I give permission to photograph or videotape my child for SHCC publication. This would include photographs or videotapes taken of your child for distribution as part of the summer camp program. Parental permission is required before your child's photograph or video can be shown publicly.

____ No, I give permission to photograph or videotape my child for SHCC publication. This would include photographs or videotapes taken of your child for distribution as part of the summer camp program. Parental permission is required before your child's photograph or video can be shown publicly.

Children's Names: -----

Parent Signature

Date
