



Errol Estate COUNTRY CLUB

REGISTRATION & MEDICAL CONSENT & RELEASE FORM FOR 2006

CHILDS NAME _____ SEX _____ DATE OF BIRTH _____

FULL TIME, 8:30 am—3:30 pm schedule available to all Members!

	M-T-W-T-F	
SESSION 1	June 5-9	<input type="checkbox"/>
SESSION 2	June 12-16	<input type="checkbox"/>
SESSION 3	July 10-14	<input type="checkbox"/>
SESSION 4	July 17-21	<input type="checkbox"/>

**Hope To
See YOU There!**

Mother _____ Father _____ Guardian (if other) _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Mother's Work _____ Father's Work _____

Cell Phone _____ E-Mail Address _____

Emergency Contact _____ Phone # _____

Does your child swim? Y N What school does child attend? _____

How did you hear about Errol Estate Country Club Day Camps — Web — Friend — Mailing

Club Registry — Treasure Chest — Attended Last Year — Other _____

*Registration of my child at Errol Estate Country Club Junior Summer Day Camp dictates acceptance of
Camp policies as described in this brochure*

I, the undersigned, am the Parent or Guardian of above named child, a minor, and have given my consent for my child's participation in all activities as implemented by the Staff. I hereby consent to my child's participation in all activities of Errol Estate Country Club Junior Summer Day Camp, excluding _____.

I expressly agree to hold Errol Estate Country Club, their Staff, Agents, and Employees, free and harmless from any claims, demands, or suits for damages arising from your children's participation in the activities of EECC Junior Summer Day Camp.

I authorize the Staff of EECC to seek emergency medical treatment for my children if I cannot be reached. I understand that I am responsible for all cost incurred for my child's medical treatment. I understand that photos of my child may be taken which may be used in future publicity or on the Camp website.

PLACE NOTARY SEAL HERE

Sworn and subscribed before me on this

_____ day of _____ 2006

(Signature of Notary Public State of Florida)

(Print Name)

Parent Signature

Print Name