

# move it!



mid-valley athletic club  
& wellness center

# move it!

March 2, 2011

Thank you for your interest in mid-valley's **Move It! Camp**. The camp is designed to provide your child (ages 5-12) with a summer explosion of new and exciting experiences. Our activities include aerobics, dancing, pilates, sports, swimming, arts and crafts, field trips, karate, guest speakers, science experiments, reading and much more.

Enclosed you will find our Camp Policies, Attendance Calendar and Rate Sheet. There is a one-time enrollment fee of **\$60.00 per child or \$90.00 per family**, and you will be required to pay your first week's attendance along with it. Please return the entire packet along with your payment so that we may secure your child's spot in the camp.

Please be advised that we do not have a refrigerator available. Drinks in glass containers will not be permitted. **Children will need to bring a lunch, swimsuit, sun screen and towel daily. Please be sure to mark your child's belongings.**

If you have any other questions about the camp or need further information, please do not hesitate to contact Carolyn at 792-3654. We hope to see you this summer!

Sincerely,

mid-valley athletic club  
Summer Camp



## mid-valley athletic club Summer Camp 2011 Policies

1. **Registration / Payment Policy** – We would appreciate that completed paperwork be returned to the office two weeks prior to attendance. At registration you must pay a \$60.00 non-refundable enrollment fee per child or \$90.00 non-refundable enrollment fee per family, plus their first week of attendance in full. Your child will not be permitted to attend unless paid in advance. Receipts are available at the front desk for each payment you make. Partial payments will not be accepted. Please keep your receipts as proof of payment.
2. **Drop Off's** - We can not accept same day or early AM drop-offs. All children need to be fully registered and signed up for that day on their calendar prior to attendance.
3. **Billing**- Payment is due weekly. You will be billed for the days that are indicated on your child's calendar whether your child attends that day or not. Credits will not be issued for missed days.
4. **Field Trips** – Field trip fees are included in your monthly rate. A Summer Camp T-shirt will be issued on the 1<sup>st</sup> field trip day. It is mandatory that your child(ren) wear their Camp T-shirt on Field Trip days.
5. **Dates and Hours** – Summer Camp runs from May 31<sup>th</sup> to August 14<sup>th</sup>. Summer Camp hours are from 8:00am to 3:30pm. Extended hours are available starting at 7:30am until 5:30pm for additional charge per child per week. We will not have anyone on staff before 7:30am or after 5:30pm. Early drop-offs are not permitted. Late pick-up fees start at \$25.
6. **Discipline Policy** – Our Discipline policy for misbehavior is 2 warnings then privileges taken away. Parents will be notified of any misconduct. If the problem continues, is ongoing, or becomes severe so as to prevent others from a comfortable and safe environment, expulsion from the camp may be required. No refunds are available.
7. **Accidents** – Your child's safety is our priority. If your child should be involved in any type of incident (scrapes, bumps, etc.) the counselor on duty will fill out a report and attach it to your child's sign in sheet. This form must be signed by a parent/guardian upon receipt and it will be kept in the child's file. If you would like a copy, please feel free to ask the counselor or the office.
8. **Electronics** – No electronics will be permitted, including Gameboys, CD players, radios, cell phones etc. The Camp Director may have an "Electronics Day" at his/her discretion. No toys of any kind should be brought from home!
9. **Movies** – Any movies viewed during Summer Camp are rated "G" or "PG" and are deemed appropriate for all age groups.
10. **Holidays** – We will be closed Memorial Day, May 29, 2009 and Independence Day, July 4, 2009.
11. **Refunds** – We will not honor any refund requests. Our staffing and planning are based on projected attendance.

***"I HAVE READ AND AGREE TO COMPLY WITH ALL OF THE ABOVE STATED POLICIES."***

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Parent / Guardian Name

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Parent / Guardian Signature

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Date

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Parent / Guardian Name

---

Parent / Guardian Signature

---

Date



Participant Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Identify any behavioral concerns and how to deal with them: \_\_\_\_\_

Limitations/Restrictions (Activity or Diet):  
\_\_\_\_\_  
\_\_\_\_\_

This individual is free from infectious disease and is up to date on all immunizations and is able to participate in recreational activities (with the limitations/restrictions listed):      YES      NO

Mid Valley does not administer any medications, please list any other information that would be helpful to staff?

\_\_\_\_\_  
\_\_\_\_\_

**PARENTS/GUARDIAN INFORMATION:**

Parent/Guardian Name \_\_\_\_\_ Social Security # \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Parent/Guardian Spouse \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Mid Valley Athletic Club + 140 S. Tucson Blvd. Tucson, AZ + 85716 + 520-792-3654 office + 520-792-3864 fax



**EMERGENCY INFORMATION:**

Name of person to notify in emergency (If Parent/Guardian cannot be reached) \_\_\_\_\_ Phone # \_\_\_\_\_



**EMERGENCY CLAUSE:** By allowing my child (children) to attend mid valley Summer Camp, I hereby give my permission to employees of mid-valley athletic club to secure proper medical attention for my child as deemed necessary. This permission extends from minor first aid treatment hospitalization (under a doctor's orders) injections, anesthesia, surgery or other medical procedures deemed necessary.

\_\_\_\_\_ Initial

**RELEASE CLAUSE:** The undersigned hereby releases and holds harmless mid-valley athletic club and any officers, employees or agents thereof, from any and all claims, liabilities or demands whatsoever arising out of the enrollment or participation in a program by the participant herein.

\_\_\_\_\_  
PARENT/GUARDIAN NAME

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

### ATTENDANCE POLICY

I UNDERSTAND THAT I AM OBLIGATED TO THE DATES OF ATTENDANCE I HAVE INDICATED ON MY CHILD'S SCHEDULE. I UNDERSTAND THAT IF MY CHILD DOES NOT ATTEND SUMMER CAMP FOR ANY NUMBER OF DAYS, I WILL STILL BE BILLED WHAT I INDICATED ON MY CHILD'S CALENDAR. **I UNDERSTAND THAT I WILL NOT BE REFUNDED ANY MONIES OR CREDITED BACK ANY DAYS IF MY CHILD DOES NOT ATTEND.**

\_\_\_\_\_  
NAME OF CHILD(REN)

\_\_\_\_\_  
PARENT/ GUARDIAN NAME

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE

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\_\_\_\_\_  
Child's Name

**M T W TH F**

**Please indicate with an " X " each day your child will be attending.**

All payments are due by the preceding Friday. There are NO exceptions. Admittance will be denied if payment has not been received prior to attendance.

**X**  
\_\_\_\_\_  
**Parent/Guardian Signature**

**JUNE**

30	31	1	2	3
xxx				

6	7	8	9	10
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13	14	15	16	17
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20	21	22	23	24
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27	28	29	30
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**Rates:**

<b>Weekly</b>	<b>\$125</b>	<b>First Child</b>
<b>Weekly</b>	<b>\$115</b>	<b>Second Child</b>
<b>Daily</b>	<b>\$45</b>	<b>First Child</b>

**JULY**

1

4 xxx	5	6	7	8
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11	12	13	14	15
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18	19	20	21	22
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25	26	27	28	29
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**AUG**

1	2	3	4	5
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8	9	10	11	12
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Daily	\$40	Second Child
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Extend day	\$50	First child
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Extend day	\$25	Second child
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<u>Enrollment</u>	<u>Fees:</u>	
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\$60	First Child
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\$90	Family Rate
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xxx No camp May 30 and July 4th

Payments are to be made at the FRONT DESK. Please do not leave payments with Summer Camp staff. Please keep your receipt as proof of payment! Child's name should always be referenced on your payment!

Please call 792-3654 with any questions.