

Redwood City Elks Lodge Emerald Hills Golf Course **Summer Golf Camps 2024**

All boys and girls, ages 7–13, are welcome.

8 week-long camps beginning June 10th through August 9th, Monday through Friday.

Camp is designed for beginners and intermediate golfers who want to improve their game.

- Morning drop off time: 8:30am-8:45am
- Golf Camp: 9am-12:30pm
- Lunch Break: 12:30pm-1pm bring your own lunch
- Afternoon Activities: 1pm-4:30pm afternoon activities include on-course golf, disc golf, pickleball, horseshoes, and badminton and will vary day-to-day. The purpose is to introduce campers to other sports - to teach, to improve skills and to HAVE FUN!

COST: \$990/week (rental clubs \$40/week)

<u>To pay by check</u>: mail this form to or drop it off at the Redwood City Elks, 938 Wilmington Way, Redwood City, CA 94062. Make payable to: "*Redwood City Elks Lodge #1991*".

<u>To pay by credit/debit card</u>: email this form to rwcelksevents@elks1991.org or drop it off at the Redwood City Elks Lodge, 938 Wilmington Way, Redwood City, CA 94062.







About our Camp:

- Designed for Beginners/young aspiring golfers improving their skills
- On-The-Course Training for Driving, Full-swing, Approach, & Putting
- Fun Golf Games to work on form / swing techniques
- Learn proper golf etiquette and proper golf techniques
- Learn or improve Disc Golf and Pickleball
- Other fun and entertaining activities: Horseshoes and Badminton

2024 Golf Camp Schedule

Week 1	June 10 th – June 14 th
Week 2	June 17 th – June 21 st
Week 3	June 24 th – June 28 th
Week 4	July 8 th – July 12 th
Week 5	July 15 th – July 19 th
Week 6	July 22 nd – July 26 th
Week 7	July 29 th – August 2 nd
Week 8	August 5 th – August 9 th

Golf Camp Refund Policy

Please note that camp cancellations are not refundable, but all fees paid may be applied to a future Golf Camp in either the 2024 or 2025 golf seasons.

^{*}Limited Availability* Sign up early! Camp will close when full.

Signup Form

Camp #

Students

Student Name

Fill in your students' information below as well as the camp number you'd like to enroll them in (see the "Golf Camp Schedule"). If you are signing up for multiple students, list each for each Camp.

Age

Golf Lessons

\$990

Club Rentals

\$40

Total Fee

\$

\$990	\$40	\$	
\$990			
	□ \$40	\$	
\$990	□ \$40	\$	
\$	Less: Discount	\$	
Tota	l Payment	\$	
	_	ash payments	
		Zip Code	
L		Card CVC (back of ca	rd, ###)
	\$ Tota Method e of the following Expir	\$ Less: Discount Total Payment Method e of the following forms. No continuous process of the following forms.	\$ Less: \$ Discount \$ Total Payment \$ Method e of the following forms. No cash payments Expiration Date Zip Code

Morning (1/2 day) Golf Camp Only Option

(Full day camp is preferred/recommended)

Signup Form

Fill in your students' information below as well as the camp number you'd like to enroll them in (see the "Golf Camp Schedule"). If you are signing up for multiple students, list each for each Camp.

Age

Golf Lessons

3 \$495

Club Rentals

\$40

Total Fee

\$

Camp #

Students

Student Name

			\$495	\(\bar{\sqrt{1}}\) \$40	\$	
			\$495	\(\begin{array}{c} \text{\$40} \\ \end{array} \end{array} \]	\$	
			\$495	\$ 40	\$	
Less: n this page) Limited Availability, Act Fast!!! 10% piscount for multiple weeks 2 or more for the public				Less: Discour	s nt	
	Total Payment					
f using a check or debit card for pays No cash payments please. (Visa or I Check	ment, please	fill out on	Methode e of the following			
Check #						
C. 14 C. 1 (V: - / M - 4 - C - 1)	- or -					
Credit Card (Visa / MasterCard) Cardholder Name				ration Date I/YYYY)	Zip Code	
Card Number					Card CVC (back of c	ard, ###)

Emergency/Medical/Contact Information

This form should be submitted (one for each Camper) on the first day of Camp when you check in.

Medical Information							
Student Name							
Allergies (i.e. food, drugs, insect	s)						
Other known health issues (i.e. d	iabetes, epilepsy, ast	hma, heart defects)					
Immunization History							
Tetanus Booster	Administered?	Date (if available) MMR		dministered?	Date (if available)		
Tuberculin (TB) Test	Administered?	Date (if available) DPT A			dministered?	Date (if available)	
Emergency Contact In	formation						
Contact Name		Work/Home Phone			Cell Phone		
Contact Name		Work/Home Phone			Cell Phone		
Contact Name	Work/Home Phone			Cell Phone			
Pediatrician							
Pediatrician Name	Phone Number						
Parent/Guardian Cont Parent/Guardian Name	act Information	on					
Address							
City		State			Zip		
Home Phone	Cell Phone			Work Phone			
E-Mail Address							

Please list the names of approved adults who can <u>pick up</u> your child	lren:
Please list the names of approved adults who can <u>drop off</u> your chil	dren:

Conditions of Enrollment, Waiver of Liability, Assumption of Risk and Indemnity

The purpose of the following is to inform the undersigned of Conditions of Enrollment, Waiver of Liability, Assumption of Risk and Indemnity when your Child/Student is participating in the Redwood City Elks Lodge #1991 (dba Emerald Hills Golf Course) Golf Camp and/or its Aftercare Program. For purposes of this document, Emerald Hills Golf Course will be referred to as EHGC.

- 1. Assumption of Risk: The undersigned, as parent and/or guardian of Child/Student acknowledges that you are aware of the inherent risks of injury, death, and property damage involved in all Camp activities, including without limitation, risks due to drowning, near drowning, falls, being hit by golf balls, actions of other people, including, but not limited to, participants, volunteers and spectators. THE UNDERSIGNED KNOWINGLY ASSUME ANY AND ALL RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN, STEMMING FROM THEIR CHILD/STUDENT'S PARTICIPATION IN THE EHGC GOLF CAMP AND ALL RELATED ACTIVITIES INCLUDING, BUT NOT LIMITED TO, ANY ACTIVITIES OF THE EHGC AFTERCARE PROGRAM.
- 2. Release and Waiver: The undersigned, as parent and/or guardian of the Child/Student hereby releases all officers, agents, volunteers and employees of EHGC ("Releases") and all other related parties from all liability to (I) you as parent and/or guardian, and (ii) Child/Student, and (iii) principals, employees, agents, representatives, guardians, successors, assigns, heirs, and next of kin for all liability, claims, damages and demands from personal injury, death, or property damages arising from or related to this Agreement or to activities involved in the EHGC Golf Camp and its Aftercare Program. This release includes, without limitation, any personal injury, death, or property damage caused by the active or passive negligence of any of the released parties, except for those caused by the willful misconduct, gross negligence, or intentional torts of the Releases.
- 3. **Indemnification and Hold Harmless**: The undersigned also hereby agrees to INDEMNIFY AND HOLD HARMLESS all officers, agents, volunteers and employees of EHGC ("Releases") from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities arising from or in any way related to the Child/Student's participation in the EHGC Golf Camp and its Aftercare Program and all related activities except for those arising out of willful misconduct, gross negligence or intentional torts of the Releases
- 4. **Refund Policy**: The undersigned acknowledges that all camp fees are non-refundable. Should cancellation be required, all fees paid may be applied to a future EHGC Golf Camp and/or its Aftercare Program during the 2024 or 2025 golf seasons.
- 5. **Acknowledgment of No Physical Impairment**: The undersigned acknowledges and certifies that the Child/Student is in good health and fully able to participate in all activities of the EHGC Golf Camp and its Aftercare Program including, but not limited to, all activities associated with golf and swimming. Further, the undersigned knows of no restrictions, physical impairments or any other facts which, in any manner, limit the Child/Student's participation in such activities and programs.
- 6. Consent to Treatment of Minor: In the event of a sudden illness, accident or injury which may occur while the Child/Student is engaged in any activity supervised by any officer, agent, volunteer or employee of EHGC, when neither parent or guardian can be contacted, the undersigned hereby gives his/her consent for emergency medical treatment. The consent allows all officers, agents, volunteers and employees of EHGC to provide and approve emergency care and transportation should it be required and to give the Child/Student prescribed medication. In the event of urgent medical circumstances, medical treatment may be given by any doctor/dentist licensed under the laws of the State of California.
- 7. **Acknowledgment of Understanding**: The undersigned has read this Conditions of Enrollment, Waiver of Liability, Assumption of Risk and Indemnity Agreement and fully understands its terms and intends that the undersigned's signature will be a complete and unconditional release of liability to the greatest extent allowed by law.
- 8. Acknowledgement of Photography: The undersigned grants EHGC permission to use the Child/Student's likeness in a photograph, video or other digital media in any and all of its publications, including web-based publications, without payment or other consideration.

Parent and/or Guardian of Child/Student	
Print Name	Dated
Signature	