



KIDZ KLUB APRIL VACATION

APRIL 18-22

9 AM - 1 PM

A FULL WEEK OF FUN!

AGES 4 - 8

**Golf • Tennis • Rockwall • Swimming
• Arts and Crafts & More**



Child's Name: _____

Home Phone: _____

Address: _____

Birth Date: _____

Age: _____ Sex _____

Parent or Guardian _____

Cell Phone: _____

Email: _____

Business Phone: _____

Emergency Contact & Phone: _____

**CHILDREN MUST BE ABLE TO GO IN THE POOL WITHOUT ADULT ASSISTANCE.
LUNCH IS NOT INCLUDED WITH OUR KIDZ KLUB VACATION PROGRAM,
HOWEVER IT CAN BE PURCHASED AT MARGOT'S CAFÉ**

9 AM – 1 PM

WEEKLY RATE \$200

INDIVIDUAL DAYS _____ x \$50 PER DAY

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

TOTAL AMOUNT DUE: \$ _____

**A MAXIMUM OF 12 PARTICIPANTS CAN BE SIGNED UP.
DROP OFF AND PICK UP IS AT BOSSE SPORTS.**

PAYMENT IS DUE IN FULL UPON REGISTRATION

Check (amount enclosed: \$ _____)

Credit Card # _____ Exp. _____

In-House Account

• Bosse Sports has my permission to use photos of my child in promotional & educational literature • I give my permission to Bosse Sports to attain emergency medical treatment for my child in the event I cannot be reached • There are absolutely no refunds or credits for missed days • Bosse Sports reserves the right to dismiss any student whose conduct is detrimental to the overall good of the Kidz Klub Program • In cases of gross misconduct, illness or accident, no refund will be made • Deductions are not allowed for late arrival or early departure • Bosse Sports maintains the highest safety standards; however it does not assume liability for accidents, illness, or disease • It is hereby understood and agreed that any accident or sickness claim will be covered by the parents or guardian's insurance.

Health Insurance Company: _____

Policy #: _____

I HAVE READ AND UNDERSTAND THE ABOVE OUTLINED

Parent or Guardian:

_____ Date: _____