

SPRING BREAK CAMP 2010

Directed by



Voted "Best of the City-2008" by Cincinnati Magazine
For "Camps For Kids: Fun and Games"



Turpin High School March 29-April 2



For Boys and Girls in **grades 1-6**
Times: **9:00a.m.-2:00p.m.**
Cost: **\$105 per camper**
Registration Deadline: **March 23**
Register online at www.laffalotcamps.com, or
fill out the registration form on the back and
send it in.

The Turpin Booster Association is excited to once again offer our **Spring Break Camp**, directed by **Laffalot Summer Camps**. This all-inclusive camp is a high energy, high activity program that introduces a variety of sports, games and activities in a fun packed day. The camp is designed to develop teamwork and encourage friendly competition, good sportsmanship, and a sense of fair play, as well as build whole body coordination. **Activities include pillo pollo, flag tag, floor hockey, dodgeball, kickball, scavenger hunts, volleyball, and much, much more!**

With 20 years of experience and thousands of satisfied campers the **Laffalot Summer Camp** will deliver a fun and memorable experience your child won't want to miss!

Turpin Spring Break Camp 2010 Registration Form

Parent's Name _____ **E-mail address** _____

Address _____ **City** _____ **Zip** _____

Phone((H) _____ **(W)** _____ **(Cell)** _____

Camper's Name _____ **Grade (2009-10 school year)** _____

School _____ **Male** _____ **Female** _____

T-SHIRT SIZE (YS) _____ **(YM)** _____ **(YL)** _____ **(AS)** _____ **(AM)** _____ **(AL)** _____

If you have any questions, please call Camp Director Pat Nymberg at 313-2076 or e-mail at pnymberg@laffalotcamps.com

******Online Registration is available at www.laffalotcamps.com**

REMEMBER...

- 1.Registration deadline is March 23 .**
- 2.Make checks payable to: Laffalot Summer Camp,LLC.**
- 3.If registering by mail please send checks with application and signed release forms to: Laffalot Summer Camp, c/o Pat Nymberg 3247 Brinton Trail, Cincinnati, Ohio 45241. An email confirmation will be sent upon completion of registration.**
- 4.Please be sure to sign all releases.**

RELEASE AND HOLD HARMLESS AGREEMENT

I, hereby acknowledge my intent to enroll my child/ward in sports, games and other activities of the Spring Break Camp (Laffalot Summer Camp, LLC sponsored ["Camp"]). In consideration of the Camp permitting my child/ward hereunder to attend the Camp, I do hereby agree that I will indemnify, save and hold harmless the Camp, Turpin High School, Forest Hills School District and their respective owners, instructors, agents, employees and representatives [collectively "Releasees"] from any and all claims, cause of action, liabilities, damages, expenses, fees and costs (including attorneys' fees and costs) of any type whatsoever which may be presented or initiated to recover money, property or damages for any injuries to persons or injurious results, or any damage to property sustained while my child/ward is engaged in activities that are held by or sponsored by the Camp and arising directly or indirectly from any activity by my child or ward as a camper or participant.

In addition, I understand that this Release and Hold Harmless Agreement extends to and applies to any personal injuries, injurious results, damages or losses which my child/ward may experience or sustain while engaged in any camp-related activities of any type whatsoever, and on behalf of my child/ward and myself, and our heirs, assigns, executors, administrators, representatives and agents I hereby release the Releasees from any and all claims, cause of action, damages, liabilities, expenses, fees and costs (including attorneys' fees and costs) of any type whatsoever for any and all losses, damages, obligations, injuries, indemnity, expenses and compensation of every kind or nature, whether anticipated or unanticipated, resulting from, arising out of, connected directly or indirectly with or relating in any way to the camp activities of the Releasees.

Child: _____ Parent/Guardian: _____ Date: _____

Medical Information & Medical Release Form

Child's Name: _____

Physician: _____ Phone: _____ Dentist: _____ Phone: _____

Medical Insurance Co. _____ Policy # _____

Please list Medical conditions you feel we should be aware of: _____

By executing this document, I also affirm that the health history, as provided is correct so as far as I know and that the undersigned minor has my permission to engage in all camp activities unless specifically noted by me in writing to the contrary. If necessary, I hereby give permission to a physician selected by the Spring Break Camp(Laffalot Summer Camp,LLC) staff to order x-rays, routine tests, and treatment for the health and benefit of my child. In the event of a medical emergency, I understand that the Spring Break Camp staff will be contacting EMS personnel for treatment of my child and possible transport to a local hospital. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected to hospitalize, secure proper treatment for, and to order injections and or surgery for my child listed below.

Additionally My Child _____,has permission to be transported for emergency medical treatment, should the need arise.

Parent/Guardian Signature: _____

Witness of Signature: _____ **Date:** _____

Further questions and considerations should be brought to the Camp Directors attention:Call Pat Nymberg at 313-2076, or e-mail at pnymberg@laffalotcamps.com