

## WAIVER

*Release of Liability and Assumption of Risk Agreement* - The facilities and activity programs offered under the auspices of the Little Rock Athletic Centers, LLC (LRAC), dba Little Rock Athletic Club, Little Rock Racquet Club, North Little Rock Athletic Club and Downtown Athletic Club, have been designed and established to provide the optimum level of beneficial exercise and enjoyment without compromising the health or safety of the Members or guests who utilize the facilities or participate in its on or off-site activities. Because of the nature of these programs and of the equipment utilized, there is an inherent risk of injury. Therefore, any exercise activity places a practical limitation on the ability of LRAC to prevent injuries to participants regardless of the activities of the participant while taking advantage of the opportunities at LRAC. The undersigned acknowledges the individual responsibility to minimize risk by thoughtful and cautious use of the programs, equipment and the facilities of LRAC.

Therefore, in consideration of being allowed to participate in LRAC programs and to utilize equipment and facilities at LRAC, I the undersigned, acknowledge and agree that:

- The risk of injury from the activities involved in LRAC programs, equipment and facilities is significant, including the potential for permanent paralysis and death.
- I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown and assume full responsibility for my participation.
- I willingly agree to comply with all terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest LRAC representative immediately.
- I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS LRAC, its members, managers, officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any INJURY, DISABILITY OR DEATH I may suffer, or loss or damage to person or property, to the fullest extent permitted by law.

*Photography and/or Video* - I understand that the LRAC periodically takes facility and group photography and video and uses the resulting content for lawful purposes including, publicity, illustration, advertising and web content. I recognize that when taking pictures or video of a large group or capturing a spontaneous event, it is not feasible for the LRAC to obtain individual consent.

I grant to LRAC and all its subsidiaries the right to take photographs and/or videos of my child. I authorize LRAC, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that LRAC may edit and use such photographs and/or videos for any lawful purpose including, for example, such purposes as publicity, illustration, advertising and web content.

*Text and Email Communication* - I agree to allow LRAC and all its subsidiaries, agents and service providers to contact me with promotional and informational texts and emails at the phone number(s) and/or email address(es) provided. I acknowledge that providing these phone numbers and email addresses is not a condition of receiving any property, goods or services. By listing this information, I certify that it is accurate and that I own the rights to use it and give consent for it/their use. Additionally, I understand that I can unsubscribe to all marketing emails and texts by contacting the Membership Office at the Club.

## PARTICIPATION AGREEMENT

My signature conveys:

- I authorize the LRAC to draft my program fee;
- I give my consent for my child to receive medical or surgical aid as may be deemed necessary and expedient by a duly licensed or recognized physician or surgeon in the case of an emergency when a parent or guardian cannot be reached. Consent is also given for an LRAC employee or his/her duly appointed representative to transport my child for emergency medical treatment in said situation;
- I have accurately described my child's swimming ability and clearly indicated my wishes regarding his/her/their participation in water activities;
- I understand and agree to the LRAC's policy on discipline;
- I understand that my child will be transported in passenger vans;
- I understand that sunscreen may be applied by LRAC staff members and have indicated my child's special needs as directed;
- I understand that I may ask for a conference with a staff member(s) as needed. I also understand that the Department of Human Services (DHS) can ask me or my child for an interview at any time concerning the facility;
- I give my permission for the club to contact me via email and text with club news and marketing information;
- I have read the Permission to Use Photography and/or Video Agreement above and give consent for my child to be in video or photographed; and
- This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, to the fullest extent permitted by law.

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

Parent's/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2020

# Spring Break Camp



1 Huntington Road | LITTLE ROCK, AR 72227  
501.225.5711 | WWW.LRRCFC.COM

*play on*

**Dates:** March 23 - 27      **Time:** 8:00 am - 5:00 pm      **Ages:** 5 - 10

**Activities:**

**Monday:** Fitness and Fun

**Tuesday:** DEFY (Third Realm)

**Wednesday:** Crafty Creations

**Thursday:** The Painted Pig

**Friday:** Scavenger Hunt

**Weekly**

Members - \$205, Non-members - \$273

\$50 non-refundable deposit required with registration

**Daily - Monday, Wednesday and Friday**

Members - \$54, Non-members - \$71

Daily not available on field trip days

The camp fee includes all activities and morning and afternoon snacks. Children should bring a healthy lunch. Enrollment is limited. Half hour extended care is available in the morning (7:30 - 8:00 am) and afternoon (5:00 - 5:30 pm) for \$5 each.

## CAMPER INFORMATION

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Gender:    Male    Female

Child is an:     LRRC member     LRAC member     Non-member

Child would like to attend on the following days:

Full week

Monday     Wednesday     Friday

Allergies, medications, special conditions including but not limited to asthma, diabetes, sun sensitivity, seizures or fainting spells (please provide specifics): \_\_\_\_\_

Will the LRRC need to dispense medication? (circle one)    YES    NO

Mother's name: \_\_\_\_\_ Father's name: \_\_\_\_\_

Street address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mother's phone: \_\_\_\_\_ Father's phone: \_\_\_\_\_

Email: \_\_\_\_\_

My child is able to swim by himself/herself and I give him/her permission to do so during camp.

My child is not able to swim by himself/herself. I request that he/she wear a lifejacket while swimming during camp.

My child may not participate in swimming activities during camp.

## PAYMENT INFORMATION

Person responsible for payment: \_\_\_\_\_

Responsible party's address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Method of Payment (Indicate your choice by completing the appropriate information below):

*For security reasons, your payment information will be encrypted by our computer software and this information will be shredded.*

LRRC/LRAC club account option (for members only/account must be current)

Name of member to be charged: \_\_\_\_\_

Credit/Debit card option (Visa, MasterCard, Discover, American Express)

Name as shown on card: \_\_\_\_\_

Credit card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_ CCV number: \_\_\_\_\_

## MEDICAL INFORMATION

Person to contact in case of emergency if parents cannot be reached: \_\_\_\_\_

Phone(s): \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Doctor's name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Emergency room of choice: \_\_\_\_\_

## PICK-UP AUTHORIZATION

Campers are transported to and from field trips in passenger vans. Children under six years of age or 60 pounds must supply boosters for use in vans.

My emergency contact is authorized to pick up my child from the LRRC.

Other adults authorized to pick-up my child from the LRRC include:

| Name | Relationship | Address | City/State/Zip | Phone |
|------|--------------|---------|----------------|-------|
|      |              |         |                |       |
|      |              |         |                |       |

## SUNSCREEN

Children should come to camp with sunscreen applied. LRRC staff members will recoat pre-school age children, if necessary. School age children will be supervised but may apply sunscreen to themselves. Any special instructions relating to sunscreen should be listed under "Camper Information."

## SWIMMING

An American Red Cross certified lifeguard is on duty during all camp swimming activities at the LRRC. To further ensure the safety of all children, we follow a strict staff/child ratio at all times.

## TRANSPORTATION

Campers are transported to and from field trips in passenger vans. Children under 6 years of age will be seated in club supplied boosters while in vans.

## DISCIPLINE

The LRRC reserves the right to remove a child from any program or activity if the child's behavior jeopardizes his/her own safety, that of others, or is so disruptive that the enjoyment of other participants is diminished. The LRRC uses "timeout" to encourage good behavior. A child who must take a timeout will be removed from participation and is required to sit alone quietly for 1 minute for each year of age, i.e., a five year old would incur a 5 minute timeout whereas an eight year old would sit for eight minutes. This policy will be clearly explained to each child at the beginning of camp. Parents will be informed on a daily basis if their child was put in timeout. Continuous behavioral problems may result in removal from camp.

## CHARGE DATE

Deposits are due at the time of registration and will be deducted from the camp fee. Weekly camp fees will be charged on Friday before camp.

