



“SportZone Summer Fun Camps”

Camp Fees - Full Day \$99/ week \$25 deposit/camper (non-refundable)
Half Day -\$65/week Due 1 wk before start of camp

Sportzone is offering “Summer Fun Camps” again this summer. There will be a series of one week camps beginning in early June and running through the end of July. The camps will focus on sports and other fun activities. Included among these activities are soccer, basketball, baseball, softball, volleyball, kickball, dodge ball and many others. These activities will be set up to meet the needs of each camper regardless of ability and to promote good sportsmanship. Each Friday, SportZone will provide a picnic lunch of pizza, hot dogs, hamburgers or sandwiches and drinks. “Summer Fun Camp” instructors will come from local colleges, high schools, and SportZone Staff.

Return Forms to: SportZone 3909 SW Burlingame Rd Topeka, KS 66609 785-267-4658 www.isportzone.com	*Campers arrive - no earlier than 7:30am; Picked up by 4:30 each day *AM sessions 7:30am to 11:30am/ PM sessions 12:30pm 4:30p *Campers must provide their own lunch Monday-Thursday *Campers will NOT be allowed to self medicate *SportZone Staff will NOT administer medicine to campers *Campers requiring meds must have it administered by a parent
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Camp Dates

Min Age – Attended Kindergarten Max Age- 6th grade

(Please check all that apply)

<input type="checkbox"/> June 2 nd -June 6 th	<input type="checkbox"/> AM	<input type="checkbox"/> PM	<input type="checkbox"/> Full Day
<input type="checkbox"/> June 9 th -June 13 th	<input type="checkbox"/> AM	<input type="checkbox"/> PM	<input type="checkbox"/> Full Day
<input type="checkbox"/> June 16 th -June 20 th	<input type="checkbox"/> AM	<input type="checkbox"/> PM	<input type="checkbox"/> Full Day
<input type="checkbox"/> June 23 rd -June 27 th	<input type="checkbox"/> AM	<input type="checkbox"/> PM	<input type="checkbox"/> Full Day
<input type="checkbox"/> July 7 th -July 11 th	<input type="checkbox"/> AM	<input type="checkbox"/> PM	<input type="checkbox"/> Full Day
<input type="checkbox"/> July 14 th -18 th	<input type="checkbox"/> AM	<input type="checkbox"/> PM	<input type="checkbox"/> Full Day
<input type="checkbox"/> July 21 st -25 th	<input type="checkbox"/> AM	<input type="checkbox"/> PM	<input type="checkbox"/> Full Day

Camper’s Name: _____ Age: _____ M/F
 Parent’s Name: _____ Day # _____
 Address: _____ City _____ Zip _____
 E-mail: _____ Home # _____ Cell # _____
 Emergency Contact: _____ Day # _____
 List any Allergies: _____

My signature acknowledges I am the parent or legal guardian of the above listed minor. I understand medical insurance is not provided with NKFL programs. I release the NKFL from any and all liability whatsoever resulting from participation in NKFL activities. I authorize those in attendance to act according to their best judgment in emergency situations requiring medical attention. I hereby waive and release the SportZone and NKFL, it’s staff, agents, sponsors, and/or coaches from any and all liability that may occur from accident, injury or illness sustained by my son/daughter during participation in these activities. I understand that no refunds will be applied within two weeks of the beginning date of a program. I understand behavior resulting in removal from a program does not constitute refund criteria. I understand that refunds, when applied, will have a 10% administrative fee accessed. I understand that if equipment is issued in conjunction with any program, failure to return said equipment within 2 weeks of the end of the program will result in legal action. I understand that any photographs, medals, awards trophies, etc., associated with programs may be held for 30 days after the end of the activities at which time, if not claimed, will be disposed of. I understand returned checks will be accessed a \$20 processing fee. I understand that photographs of all SportZone, NKFL, MEGA, Shunga activities and activities conducted by leased tenants will be taken and may be used for brochures, promotions and advertising without permission.

I acknowledge all information and waivers contained herein.
Parent/ Guardian Signature _____ **Date** _____