

Please fill out this registration form and return to LMU Summer Sports Camps, Gersten Pavilion, 1 LMU Drive, MS 8505, Los Angeles, CA 90045 or Fax to 310/338-4577 (Credit card & full payment required for faxed applications.)
 (Must include a minimum \$150 non-refundable deposit, per child, per session, with balance due by JUNE 1st.)
 (Full payment is required for registration after June 1, 2010)

CHILD'S NAME: _____ FAMILY EMAIL: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

AGE (AT CAMP): _____ DATE OF BIRTH: _____ SEX: _____ SCHOOL: _____

Does Participant have any medical conditions or disabilities? YES NO

IF YES, PLEASE DESCRIBE: _____

PARENT/GUARDIAN 1: _____

NAME	Work Phone	Home Phone	Cell
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PARENT/GUARDIAN 2: _____

NAME	Work Phone	Home Phone	Cell
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EMERGENCY CONTACT: _____

(If different from parents) NAME Work Phone Home Phone Cell

MEDICAL INSURANCE CARRIER: _____

I hereby authorize the staff of the Loyola Marymount University Summer Sports Camps to act for me according to their best judgment in any emergency requiring medical attention for my child. I hereby waive and release the camp from any and all liability for injuries or illnesses incurred while at camp. I have no knowledge of physical impairment that would be affected by the above named camper's participation in the LMU camp program, as outlined in the brochure/flyer. Photos of my child taken during LMU camp activities may be used by LMU for promotional purposes.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____

PAYMENT AND REMITTANCE POLICY

Completed registration forms should be returned with full payment OR a \$150 deposit per child, per session, which is applied to the camp fee, to: LMU Summer Sports Camps, 1 LMU Drive, MS 8505, Los Angeles, CA 90045. **Balance of payment is due by June 1, 2010.** You may also fax your form with full payment only to 310/338-4577.

IMPORTANT:

- ✓ I am aware there is a \$150.00 cancellation fee per camp session for any and all reasons, including medical, if I decide to cancel any camp session from this point on up until the two weeks prior to the start of camp.
- ✓ Furthermore, I understand if I cancel within two weeks of the start of camp, there will be no refund.

Please sign and date here: _____

*Registrations received without acknowledgement (signature) of the cancellation fees will not be processed.

___ LMU Alumni Association or Faculty/Staff Discount – Less \$25 Graduation Year _____ Name _____

ALUMNI, FACULTY/STAFF OFFER MUST BE MAILED OR FAXED TO RECEIVE DISCOUNT (Discounts are not combined)

Completed enrollment forms and checks made payable to LMU Summer Sports Camps should be mailed to: Loyola Marymount University, Summer Sports Camps, 1 LMU Drive, MS 8505, Los Angeles, CA 90045. A minimum \$150 non-refundable deposit per child, per session must be made at the time of application with the balance due on or before JUNE 1st. Registrations received after June 1st requires payment in full.

VISA OR MASTERCARD CREDIT CARD#: _____ EXP. DATE: _____

CARDHOLDER'S SIGNATURE: _____ DATE: _____

PLEASE SELECT CAMP SESSION: (FULL PAYMENT REQUIRED FOR ALL CREDIT CARD PAYMENTS): _____

Aquatics – Coed Swim

- Session 1: ~~June 21-25~~ FULL
- Session 2: July 12-16 Ext Care AM PM
- Session 3: July 26-30 Ext Care AM PM
- Session 4: Aug 2-6 Ext Care AM PM
- Session 5: Aug 9-13 Ext Care AM PM

Aquatics – Coed Water Polo

- Session 1: July 19-23 Ext Care AM PM

Aquatics – Advanced Swim

- Session 1: ~~June 21-25~~ FULL
- Session 2: Aug 9-13 Ext Care AM PM

Baseball

- Session 1: June 28-July 2 Ext Care AM PM
- Session 2: July 5-9 Ext Care AM PM
- Session 3: July 19-23 Ext Care AM PM
- Session 4: July 26-30 Ext Care AM PM

Girl's Volleyball

- Session 1: July 5-9 Full Day Skills Ext Care AM PM

Girl's Basketball

- Session 1: June 28-July 2 Ext Care AM PM
- Session 2: Aug 2-6 Ext Care AM PM

Girl's Softball

- Session 1: June 21-25 Ext Care AM PM
- Session 2: ~~July 12-16~~ CANCELLED
- Session 3: July 26-30 Ext Care AM PM
- Session 4: Aug 9-13 Ext Care AM PM

Co-Ed Soccer

- Session 1: July 5-9 Ext Care AM PM
- Session 2: July 12-16 Ext Care AM PM
- Session 3: July 19-23 Ext Care AM PM
- Session 4: July 26-30 Ext Care AM PM

Soccer Counselor in Training (CIT) Program

- Session 1: July 5-9
- Session 2: July 12-16
- Session 3: July 19-23
- Session 4: July 26-30

Coed Golf

- Session 1: July 5-9 Ext Care AM PM
- Session 2: July 19-23 Ext Care AM PM
- Session 3: Aug 2-6 Ext Care AM PM

Boy's Basketball

- Session 1: June 21-25 Ext Care AM PM
- Session 2*: July 12-16 Ext Care AM PM

*open to 1st-6th grade only

Tennis – Youth (All Levels)

- (Extended Care offered for full day only)
- Session 1: June 21-25 Ext Care
- ___ Half Day ___ Full Day
- Session 2: ~~June 28 July 2~~ FULL
- ___ Half Day ___ Full Day
- Session 3: July 5-9 Ext Care
- ___ Half Day ___ Full Day
- Session 4: July 12-16 Ext Care
- ___ Half Day ___ Full Day
- Session 5: July 19-23 Ext Care
- ___ Half Day ___ Full Day
- Session 6: July 26-30 Ext Care
- ___ Half Day ___ Full Day
- Session 7: Aug. 2-6 Ext Care
- ___ Half Day ___ Full Day
- Session 8: Aug. 9-13 Ext Care
- ___ Half Day ___ Full Day
- Session 9: Aug 16-20 Ext Care
- ___ Half Day ___ Full Day
- Session 10: Aug 23-27 Ext Care
- ___ Half Day ___ Full Day

Coed Cheer

- Session 1: July 19-23 Ext Care AM PM
- Session 2: Aug 9-13 Ext Care AM PM

