

TENNIS CAMP – Located at the Michigan Athletic Club (MAC), 2500 Burton St SE

Please circle Skill Level: 1.0 1.5 2.0 2.5 3.0

- Session A (Ages 7-10): June 17-20 (Tu.-F): 9:00-10:15am \$40.00
- Session B (Ages 11-13): June 17-20 (Tu.-F): 10:30am-12:00pm \$45.00
- Session C (Ages 7-10): June 23-26 (Mon.-Th.): 9:00-10:15am \$40.00
- Session D (Ages 11-13): June 23-26 (Mon.-Th.): 10:30-12:00pm \$45.00

VOLLEYBALL – Located at Grand Rapids Christian High School, 2300 Plymouth SE

- Session A (Grades 7-9): July 21-25 (M-F) M-Th., 11:30am-3:30pm; F, 8:30am-12:30pm \$135.00
- Session B (Grades 3-6): July 21-24 (M-Th.); 3:00-5:30pm \$ 70.00
- Session C (Grades 3-4): July 28-31 (M-Th.); 8:30-11:00am \$ 70.00
- Session D (Grades 5-6): July 28-31 (M-Th.); 11:00am-1:30pm \$ 70.00
- Session E (Grades 7-9): July 28-31 (M-Th.); 8:30am-1:30pm \$135.00
- Session F (Grades 10-12): July 28-31 (M-Th.); 1:00-6:00pm \$135.00

MAIL-IN REGISTRATION BEGINS MONDAY, MARCH 10, 2008.

Any registrations postmarked prior to Saturday, March 8 will go the end of the week’s registrations and will not be processed until Monday, March 17.

NOTE: There will be NO FULL refunds after Friday, May 23, 2008.

DEPOSITS, as indicated in the brochure, WILL NOT be refunded, transferred to another camp or transferred to another child after Friday, May 23, 2008.

INSURANCE/INJURY POLICIES

The college is not liable for injuries sustained by students in camp programs even though such injuries occur on college premises, in sport classes, or in competition. The college does not undertake to be the insurer of its students and its liability under the law must be based on fault. It is necessary, in order to establish the liability of the college for such injuries, not only to prove negligence or carelessness on the part of the college, but also to show that the student was free from any negligence or carelessness which might have contributed to the injuries. Accordingly, students and parents are advised to be certain that there is coverage by personal or family health and accident insurance.

Parent/Guardian Signature: _____

Daytime Phone: _____

Office Use Only			Date Rec'd: _____
Camp: _____	Amt. Rec'd: _____	Amt. Due: _____	Check #: _____
Camp: _____	Amt. Rec'd: _____	Amt. Due: _____	Check #: _____
Camp: _____	Amt. Rec'd: _____	Amt. Due: _____	Check#: _____
Camp: _____	Amt. Rec'd: _____	Amt. Due: _____	Check#: _____
Camp: _____	Amt. Rec'd: _____	Amt. Due: _____	Check#: _____
Camp: _____	Amt. Rec'd: _____	Amt. Due: _____	Check#: _____