

2025 Summer Camp Registration Form

Children must be a minimum of 6 years old (by 1/01/2026) to participate in HHCC camps.

Children can only be enrolled for a maximum of 5 weeks.

ember Name: Account Number:			
Camper Name:	Nickname (if any)	Gender:	
DOB:/Current Sch	hool: Grad	de Level (2025-26)	
☐ No, I do not give permission for	graphs or video of my child to be used. photography or video of my child to be used r video of my child to be used in-house by t form.		
	EMERGENCY CONTACT INFORMATION		
Emergency Contact #1:	Relationship to Camper_		
Emergency Phone	Alternative Number:		
Emergency Contact #2:	Relationship to Camper		
Emergency Phone	Alternative Number:		
	MEDICAL INFORMATION		
Does your child have any allergies? YES/NC If yes, please explain:)		
Does your child need medication at school of yes, please explain:	? YES/NO		
Does your child have any other medical issu	ues of which we need to be aware? YES/NO		



2025 Summer Camp Pick Up Authorization

Campers will only be released to the Parent/Guardian(s) listed on their member account. Any Additional party that attempts to pick up your camper(s) must be on that camper's authorized pick up list and present I.D. upon pick up. Failure to meet either of these conditions will result in the refusal to release your camper(s) to that individual. Only one of these forms is required per family.

CONTACT INFORMATION			
Parent/ Guardian Name:_	Member ID:	_	
Phone:	Email:		
Camper Name(s):First Middle Last			
	I give permission for the following individuals to pick up my camper(s).		
Name:	Relation:		
	The Following Individuals may NOT pick up my camper(s)		
Name:	Relation:		
Name:	Relation:		
Parent/ Guardian Signature	· Date:		



2025 Pool Snack Shack Permissions

Hunting Hills Country Club is fortunate enough to be able to host a poolside restaurant referred to as the "Snack Shack". During pool-time campers can access this amenity with the signed permission of their parent/guardian. Snack Shack charges can be made to the chosen member account(s), or paid via cash or card. Please indicate below if you would like restricted/limited access to the Snack Shack. Campers that do not have a signed permission slip will not have access to the Snack Shack. Please be sure to let your camper know of any limits prior to drop-off.

SNACK SHACK PERMISSIONS		
Campers Names:		
Member Account to be charged (if applicable):		
Would you like your child to have access to the Pool Snack Shack? (YES/NO)		
Would you like a weekly/daily spending limit assigned to your camper? (YES/NO) If Yes please specify down below.		
Are there any specific restrictions to what types of food your camper(s) can purchase? (Ex. no soda, candy, hot meals, etc.) (YES/NO) If Yes please specify down below.		
Parent / Guardian Signature: Date:		



AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the above district to participate in camp activities and swimming, I hereby waiver, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its independent contractors, employees, etc.) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

By signing this consent, I hereby absolve the Hunting Hills Country Club, their employees, independent contractors, from all liability that may arise as a result of my minor child/children participation in camp activities and swim time to be conducted at Hunting Hills Country Club. I hereby give my permission for his/her participation as indicated and in so doing, absolve the Hunting Hills Country Club, their employees, independent contractors from any and all liability.

PARENTAL CONSENT: (to be completed and signed by parent/guardian for applicant is under 18 years of age. I hereby consent that my son/daughter, participate in the registered activity, and I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity. I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.

HHCC Child Services is a license exempt program		
Child's Name: :		
Parent/ Guardian Signature Date:	Print Name :	



Summer Camp 2025 Dates and Rates

Please select each session you would like to enroll for. Each session operates Monday - Friday from 7:30am-5:00pm at a price of \$250 (member) per camper/\$275(non-member). A 50% deposit is required to reserve a spot in each week registered.

Enroll before March 28th to lock in Early Bird Pricing of \$225 per camper.

	☐ Session 1 (Animal Kingdo	n) : June 2-6
	☐ Session 2 (Junior Sports C	amp #1):June 9-13(Waitlist Only)
	☐ Session 3 (Cooking): June	16-20 (Waitlist Only)
	☐ Session 4 (Junior Sports C	amp #2) : June 23-27
	☐ Session 5 (Halloween):Jul	y 7-11
	☐ Session 6 (Junior Sports C	amp #3): July 14-18
	☐ Session 7 (ART/STEM): Jul	y 21-25
	☐ Session 8 (Junior Sports C	amp #4): July 28-August 1(Waitlist Only
	☐ Session 9 (Disney Advente	ure): August 4-8
Child's Name: :		_
Parent/ Guardian Signature	e Date :	_Print Name :